| Fill in this information to identify your case: | | | | |
|---|-----------------------------|-------------|-----------|--|
| Debtor 1 | Angelica Marie Wills | | | |
| Dobtor 1 | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: District of Arizona | | | | |
| Case number | 2:18-bk-13149 (If known) | | - | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B...... \$6,239.00 1b. Copy line 62, Total personal property, from Schedule A/B..... 1c. Copy line 63, Total of all property on Schedule A/B..... \$6,239.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$9,366.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D...... 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$99,929.69 \$109,295.69 Your total liabilities Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$1,226.65 Copy your combined monthly income from line 12 of Schedule I 5. Schedule J: Your Expenses (Official Form 106J) \$2,952.00 Copy your monthly expenses from line 22c of Schedule J.....

Last Name

2:18-bk-13149 Case number (if known)

| Part 4: | Answer These | Questions for | Administrative | and Statistical | l Records |
|---------|--------------|---------------|----------------|-----------------|-----------|

| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other Yes | schedule | 98. | |
|----|--|----------|-----------|--|
| 7. | What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a perso family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and this form to the court with your other schedules. | | | |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$ | 35,898.12 | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim |
|--|-------------|
| From Part 4 on <i>Schedule E/F</i> , copy the following: | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ |
| 9d. Student loans. (Copy line 6f.) | \$56,113.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$ |
| 9g. Total. Add lines 9a through 9f. | \$56,113.00 |

| ebtor 1 | | | | |
|-----------------------|------------------------------|--|---|---|
| | Angelica Marie Wills | | | |
| btor 2 | First Name | Middle Name | Last Name | |
| ouse, if filing) | First Name | Middle Name | Last Name | |
| ted States I | Bankruptcy Court for the: | District of Arizona | | |
| se number | 2:18-bk-13149 | | | _ |
| | | | | ☐ Check if this is amended filing |
| ٠ د : - : | Farma 1004/ | Б | | anonasa ming |
| rtticiai | Form 106A/ | <u>B</u> | | |
| che | dule A/B: | Propert | y | 12/15 |
| rt 1: Do Do you ov | | idence, Building, or equitable intere | , . | |
| 1.1 | eet address, if available, o | | Single-family home Duplex or multi-unit building | the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Proper |
| | | · | Condominium or cooperativeManufactured or mobile home | Current value of the Current value of t entire property? portion you own? |
| | | | Land | \$\$ |
| City | 1 | State ZIP Code | ☐ Investment property ☐ Timeshare ☐ Other | Describe the nature of your ownership interest (such as fee simple, tenancy the entireties, or a life estate), if known |
| | | | Who has an interest in the prop | |
| | | | Debtor 1 only | Check if this is community propert |
| Cou | unty | | Debtor 2 only Debtor 1 and Debtor 2 only | |
| | | | At least one of the debtors and a | another |
| | | | | add about this item, such as local |
| | | | property identification number: | : |
| | | | | |
| | | | | |
| | | | | |
| lf you owr | n or have more than or | ne, list here: | What is the property? Check all the Single-family home Duplex or multi-unit building | at apply. Do not deduct secured claims or exemptions. If the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Prope |

Other information you wish to add about this item, such as local property identification number:

Investment property

Debtor 1 and Debtor 2 only

Timeshare

Other

Debtor 1 only
Debtor 2 only

ZIP Code

State

City

County

Case 2:18-bk-13149-EPB Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12 Desc

At least one of the debtors and another

Who has an interest in the property? Check one.

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property

(see instructions)

| Street address, if available, or other description City State ZIP Code County | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: | Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the entire property? Describe the nature of interest (such as fee the entireties, or a life. Check if this is con (see instructions) m, such as local | d claims on Schedule D: as Secured by Property. Current value of the portion you own? \$ If your ownership simple, tenancy by e estate), if known. |
|---|--|--|---|
| 2. Add the dollar value of the portion you own for all you have attached for Part 1. Write that number have attached for Part 1. Write that number have been part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest you own that someone else drives. If you lease a vehicle 3. Cars, vans, trucks, tractors, sport utility vehicles, No No Yes | st in any vehicles, whether they are registered or report it on Schedule G: Executory Contracts a | not? Include any vehicles | \$0.00 |
| 3.1. Make: Toyota Model: Corolla Year: 2007 Approximate mileage: 100000 Other information: Condition: Good | Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) | Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$2,289.00 | d claims on <i>Schedule D:</i> |
| If you own or have more than one, describe here: 3.2. Make: Model: Year: Approximate mileage: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ | d claims on <i>Schedule D:</i> |

| | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla | |
|----------|---|--|---|---------------------------------------|
| <u> </u> | Model: | Debtor 1 only | the amount of any secured Creditors Who Have Claim | |
| | Year: | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | Other information: | Check if this is community property (see | \$ | \$ |
| | | instructions) | | |
| | | | | |
| | | | | |
| | | Who has an interest in the property? Check one. | Do not deduct secured cla | ims or exemptions. Put |
| | Make: | Debtor 1 only | the amount of any secured | d claims on Schedule D: |
| | Model: | Debtor 2 only | Creditors Who Have Clain | ns Securea by Property. |
| | Year: | Debtor 1 and Debtor 2 only | | Current value of the portion you own? |
| | Approximate mileage: | At least one of the debtors and another | entire property? | portion you own? |
| | Other information: | | Ф | ¢ |
| | | Check if this is community property (see | \$ | \$ |
| | | instructions) | | |
| | | | | |
| 4 10/-1- | vereth sinereft meeter bemos ATVs and s | | | |
| | | other recreational vehicles, other vehicles, and acces rcraft, fishing vessels, snowmobiles, motorcycle accesso | | |
| V | | relait, listling vessels, showmobiles, motorcycle accesso | 1163 | |
| | res | | | |
| '· | 65 | | | |
| | Males | Who has an interest in the property? Check one. | Do not deduct secured cla | ime or exemptions. But |
| 4.1. | Make: | Debtor 1 only | the amount of any secured | d claims on <i>Schedule D:</i> |
| | Model: | Debtor 2 only | Creditors Who Have Clain | ns Secured by Property. |
| | Year: | Debtor 1 and Debtor 2 only | Current value of the | Current value of the |
| | Other information: | At least one of the debtors and another | entire property? | portion you own? |
| | | | | |
| | | Check if this is community property (see | \$ | \$ |
| | | instructions) | | |
| | | | | |
| If you | u own or have more than one, list here: | | | |
| • | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla | ims or exemptions. Put |
| 4.2. | Model: | Debtor 1 only | the amount of any secured | d claims on <i>Schedule D:</i> |
| | | Debtor 2 only | Creditors Who Have Clain | |
| | Year: | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | At least one of the debtors and another | entire property: | portion you own: |
| | | | \$ | \$ |
| | | Check if this is community property (see instructions) | Ψ | Ψ |
| | | mstructions) | | |
| | | | | |
| | | | | |
| | | | ı | |
| | | or all of your entries from Part 2, including any entries | | \$2,289.00 |
| you | nave attacned for Part 2. Write that number | er here | | |
| | | | | |
| | | | | |

| Do | Current value of the portion you own? | | |
|----------|---------------------------------------|--|---|
| 6. | Household goods and furnishings | | Do not deduct secured claims or exemptions. |
| | | nces, furniture, linens, china, kitchenware Household goods, Bed frame and chair | or oxomptions. |
| | ☐ NO | Household goods, bed frame and chair | |
| | Yes. Describe | | |
| | | | \$2,300.00 |
| | | | |
| 7. | Electronics | | |
| | | and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games | |
| | □ No | Electronics |] |
| | ✓ Yes. Describe | | \$500.00 |
| | | | |
| 8. | Collectibles of value | figurings, pointings, prints, or other arthuryly heals, pictures, or other art shipstor | |
| | | l figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles | |
| | ☑ No | | 0.00 |
| | Yes. Describe | | \$_0.00 |
| a | Equipment for sports a | nd hobbies | |
| J. | • • • | ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | |
| | | carpentry tools; musical instruments | _ |
| | □ No | Golf clubs | 100.00 |
| | Yes. Describe | | \$_100.00 |
| 10 | Firearms | | |
| 10. | | shotguns, ammunition, and related equipment | _' |
| | ☑ No | onorgano, ammuniton, and routed equipment | |
| | Yes. Describe | | \$ <u>0.00</u> |
| 11 | Clothes | | |
| | | thes, furs, leather coats, designer wear, shoes, accessories | |
| | □ No | Clothing | 000.00 |
| | Yes. Describe | | \$ |
| | | | |
| 12. | Jewelry | | |
| | Examples: Everyday jew gold, silver | relry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| | □ No | Jewelry | \$ 300.00 |
| | Yes. Describe | | Φ |
| 13. | Non-farm animals | | |
| | Examples: Dogs, cats, b | irds, horses | |
| | ☑ No | | \$ 0.00 |
| | Yes. Describe | | \$ |
| 14. | Any other personal and | household items you did not already list, including any health aids you did not list | |
| | ☑ No | | 0.00 |
| | Yes. Give specific information | | \$ |
| <i>.</i> | | | 2 400 00 |
| 15. | | all of your entries from Part 3, including any entries for pages you have attached | \$_3,400.00 |
| | | | |

| Do you own or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|--|--|
| 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No | |
| ☐ Yes | \$ |
| 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage house and other similar institutions. If you have multiple accounts with the same institution, list each. No | es, |
| ✓ Yes Institution name: | |
| 17.1. Checking account: Arizona Federal Credit Union | § 0.00 |
| 17.2. Checking account: | |
| 17.3. Savings account: | \$ |
| 17.4. Savings account: | \$ |
| 17.5. Certificates of deposit: | \$ |
| 17.6. Other financial account: | \$ |
| 17.7. Other financial account: | |
| 17.8. Other financial account: | |
| 17.9. Other financial account: | |
| | |
| 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ☑ No ☐ Yes Institution or issuer name: | |
| | \$ |
| | \$ \$ |
| 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☑ No ☐ Yes. Give specific information about them | |
| Name of entity: % of ownersh | ip: |
| | % \$ |
| | % \$ |
| | |

| 20. Government | and corporate bonds and other negotiable and non-negotiable instruments | |
|-------------------------|--|------------------|
| Negotiable in | struments include personal checks, cashiers' checks, promissory notes, and money orders. | |
| Non-negotiab | le instruments are those you cannot transfer to someone by signing or delivering them. | |
| Yes. Give | specific | |
| information them | n about | |
| Issuer name: | | |
| | | \$ |
| | | \$ |
| - | | \$ |
| 21. Retirement o | r pension accounts | |
| | erests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| ☑ No | | |
| Yes. List e | | |
| Type of ac | sparatory. | |
| 401(k) or similar p | lan: | _ \$ |
| Pension plan: | | \$ |
| • | | |
| IRA: | | |
| Retirement accou | nt: | _ \$ |
| Keogh: | | _ \$ |
| Additional accoun | t: | _ \$ |
| Additional accoun | t: | - \$ |
| Your share of | all unused deposits you have made so that you may continue service or use from a company preements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications or others | |
| □No | | |
| ✓ Yes | Institution name or individual: | |
| Electric: | | \$ |
| Gas: | | \$ |
| Heating oil: | | \$ |
| Rental unit: | | \$ |
| Prepaid rent: | | \$ |
| Telephone: | | \$ |
| Water: | | \$ |
| Rented furniture: | | \$ |
| Other: | Security deposit on rental unit | \$ <u>550.00</u> |
| | | |
| 23. Annuities (A | contract for a periodic payment of money to you, either for life or for a number of years) | |
| ∠ No | 2 | |
| Yes | | |
| | | \$ |
| | | <u> </u> |
| | | \$ |

| | 4. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). INO | | | |
|-----|--|---|--|---|
| | | name and description. Separately file the records of any inter | rests.11 U.S.C. § 521(c | >): |
| | | | | _ \$ |
| | | | | _ \$ _ \$ |
| | | | | Ψ |
| | exercisable for your benefit | property (other than anything listed in line 1), and rights o | or powers | |
| | ✓ No Yes. Give specific information about them | | | \$0.00 |
| 26 | Patents convrights trademarks trade | secrets, and other intellectual property | | |
| | Examples: Internet domain names, websit | es, proceeds from royalties and licensing agreements | | _ |
| | ✓ No Yes. Give specific information about them | | | \$0.00 |
| 27. | Licenses, franchises, and other genera | | | |
| | Examples: Building permits, exclusive lice | nses, cooperative association holdings, liquor licenses, profe | essional licenses | |
| | Yes. Give specific information about them | | | \$0.00 |
| Мо | ney or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ax refunds owed to you | | | |
| | ☐ No ✓ Yes. Give specific information about them, including whether | 81% of potential tax refund for year ending 12/31/2018, 81% of potential tax refund for year ending 12/31/2018 | Federal: | _{\$} _Unknown |
| | you already filed the returns and the tax years | | State: | \$Unknown \$ 0.00 |
| | • | | Local: | <u>\$ 0.00</u> |
| | Family support Examples: Past due or lump sum alimony. No | spousal support, child support, maintenance, divorce settlen | nent, property settleme | ent |
| | Yes. Give specific information | | Alimony: | \$_0.00 |
| | | | Maintenance: | \$ 0.00 |
| | | | Support: | \$ 0.00 \$ 0.00 |
| | | | Divorce settlement: Property settlement: | \$ <u>0.00</u> |
| 30. | Other amounts someone owes you Examples: Unpaid wages, disability insura | nce payments, disability benefits, sick pay, vacation pay, wo | orkers' compensation, | |
| | Social Security benefits; unpai | d loans you made to someone else Earned but unpaid wages owed to Debtor as of petition filing | g date | |
| | Yes. Give specific information | | | _{\$} Unknown |
| | | | | |

| Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: \$ | | nterests in insurance policies Examples: Health, disability, or life insuranc ☑ No | e; health savings account (HSA); credit, l | homeowner's, or renter's insurance | |
|---|-----|--|--|---|---|
| 32. Any interest in property that is due you from someone who has died | | Yes. Name the insurance company | Company name: | Beneficiary: | Surrender or refund value: |
| \$ Any Interest in property that is due you from someone who has clied If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has clied. No No Yes. Give specific information | | or each policy and list its value | | | \$ |
| S. Any financial assets you did not already list No Yes. Describe each claim. \$0.00 | | | | | \$ |
| If you are the beneficiary of a living fusul, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information | | | | | \$ |
| 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | | f you are the beneficiary of a living trust, exproperty because someone has died. | | y, or are currently entitled to receive | |
| Examples: Accidents, employment disputes, insurance claims, or rights to sue No | ı | Yes. Give specific information | | | _{\$} 0.00 |
| 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim \$0.00 35. Any financial assets you did not already list No Yes. Give specific information | | Examples: Accidents, employment disputes No | - | demand for payment |] |
| to set off claims No Yes. Describe each claim | ı | Yes. Describe each claim | | | _{\$} 0.00 |
| Yes. Describe each claim | 1 | o set off claims | s of every nature, including countercla | ims of the debtor and rights | |
| Yes. Give specific information | i | | | | <u>\$</u> 0.00 |
| Yes. Give specific information | 35. | ـــٰ nv financial assets vou did not alreadv. | list | | _' |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here | | | | | _ |
| Fart 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ✓ No. Go to Part 6. ─ Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ─ No ─ Yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ─ No ─ No | ı | Yes. Give specific information | | | \$_0.00 |
| 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No Yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No | | - | | | \$550.00 |
| 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No Yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No | | | | | |
| Ves. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No Yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Vec Peceribe | Pai | t 5: Describe Any Business-R | elated Property You Own or H | lave an Interest In. List any re | eal estate in Part 1. |
| portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No Yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe | | No. Go to Part 6. | e interest in any business-related prop | perty? | |
| Yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No | | | | | portion you own? Do not deduct secured claims |
| Yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No | 38. | accounts receivable or commissions you | u already earned | | |
| 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No | | | | | |
| Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No | | | | | \$ |
| Voc Describe | | Examples: Business-related computers, software, | | , telephones, desks, chairs, electronic devices | |
| | l | Yes. Describe | | | \$ |

| 40. Machinery, fixtures, | equipment, supplies you use in business, and tools of your trade | |
|---|---|---|
| ☐ No ☐ Yes. Describe | | \$ |
| 41. Inventory | | |
| ☐ No ☐ Yes. Describe | | \$ |
| 42. Interests in partners | nips or joint ventures | |
| Yes. Describe | Name of entity: % of or | wnership: % |
| | | |
| 43. Customer lists, maili | ng lists, or other compilations | |
| | s include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| Yes. Des | cribe | \$ |
| ☐ No | l property you did not already list | |
| Yes. Give specific information | | \$ \$ |
| | | \$ \$ |
| | | \$ \$ |
| | of all of your entries from Part 5, including any entries for pages you have attached number here | \$_0.00 |
| | | |
| | Any Farm- and Commercial Fishing-Related Property You Own or Have an lor have an interest in farmland, list it in Part 1. | Interest In. |
| 46. Do you own or have V No. Go to Part 7. Yes. Go to line 47 | any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | | Current value of the portion you own? Do not deduct secured claims or examplings |
| • | poultry, farm-raised fish | or exemptions. |
| ☐ No ☐ Yes | | • |
| | | \$ |

| 48. Crops—either growing or harvested | | | |
|--|------------------------|--------------------------------|------------------------|
| ☐ Yes. Give specific | | | |
| information | | | \$ |
| 49. Farm and fishing equipment, implements, machinery, fixture | es, and tools of trade | | |
| ☐ Yes | | | \$ |
| 50. Farm and fishing supplies, chemicals, and feed | | | Ψ |
| □ No | | | _ |
| Yes | | | \$ |
| 51. Any farm- and commercial fishing-related property you did r | | | |
| ☐ No☐ Yes. Give specific | | | 7 |
| information | | | \$ |
| 52. Add the dollar value of all of your entries from Part 6, includ for Part 6. Write that number here | 5 , 1 5 | • | \$_0.00 |
| ior Part 6. Write that number here | | 7 | |
| Part 7: Describe All Property You Own or Have | an Interest in Tha | t You Did Not List Above | |
| 53. Do you have other property of any kind you did not already | | | |
| Examples: Season tickets, country club membership | iist? | | |
| ✓ No ☐ Yes. Give specific | | | |
| information | | | |
| | | | |
| 54. Add the dollar value of all of your entries from Part 7. Write t | hat number here | → | \$_0.00 |
| | | | |
| Part 8: List the Totals of Each Part of this Form | 1 | | |
| 55. Part 1: Total real estate, line 2 | | | \$ <u>0.00</u> |
| 56. Part 2: Total vehicles, line 5 | \$ <u>2,289.00</u> | | |
| 57. Part 3: Total personal and household items, line 15 | \$ <u>3,400.00</u> | | |
| 58. Part 4: Total financial assets, line 36 | \$ <u>550.00</u> | | |
| 59. Part 5: Total business-related property, line 45 | \$_0.00 | _ | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$ <u>0.00</u> | _ | |
| 61. Part 7: Total other property not listed, line 54 | + \$0.00 | | |
| 62. Total personal property. Add lines 56 through 61 | _{\$} 6,239.00 | Copy personal property total > | 4 \$ 6,239.00 |
| | | | |
| 20 Total of all meanants on Cabadula A/D. Add line EE. Line CO. | | | _{\$} 6,239.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$_0,200.00 |

| Fill in this information to identify your case: | | | | | | |
|---|----------------|------------------------------|-----------|---|--|--|
| Debtor 1 | Angelica Marie | Wills | | | | |
| | First Name | Middle Name | Last Name | - | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | . , | for the: District of Arizona | | | | |
| Case number | 2:18-bk-13149 | | | | | |
| (If known) | | | | | | |

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exempt | | | | | | | | | |
|--|--------------------------------------|--|------------------------------------|--|--|--|--|--|--|
| Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | | | |
| 2. For any property you list on Schedule A/B th | nat you claim as exempt, fill i | n the information below. | | | | | | | |
| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | | | | | | |
| | Copy the value from Schedule A/B | Check only one box for each exemption | | | | | | | |
| 2007 Toyota Corolla Brief description: Line from Schedule A/B: 3.1 | \$ <u>2,289.00</u> | \$ 6,000.00 100% of fair market value, up to any applicable statutory limit | Ariz. Rev. Stat. § 33-1125 (8) | | | | | | |
| Household goods - Household goods Brief description: Line from Schedule A/B: 6 | \$ 2,000.00 | \$\frac{3,000.00}{100\% of fair market value, up to any applicable statutory limit | Ariz. Rev. Stat. § 33-1123 | | | | | | |
| Brief Bed frame and chair description: Line from Schedule A/B: 6 | \$ <u>300.00</u> | | Ariz. Rev. Stat. § 33-1123 | | | | | | |
| 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) ☑ No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes | | | | | | | | | |

Case number (if known) 2:18-bk-13149

Part 2:

Additional Page

| | | otion of the property and line A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption | Specific laws that allow exemption |
|-----------------------|-----------------------------|---|---|--|---|
| | | nics - Electronics | | Tor odori oxomption | Ariz. Rev. Stat. § 33-1123 |
| Line | ription: | 7 | \$ <u>500.00</u> | \$\frac{3,000.00}{100\% of fair market value, up to any applicable statutory limit | |
| Brief desc Line | Clothin ription: from | g - Clothing | \$ <u>200.00</u> | \$ 500.00 100% of fair market value, up to any applicable statutory limit | Ariz. Rev. Stat. § 33-1125 (1) |
| Brief desc Line | ription: | 11 a Federal Credit Union (Checking) 17.1 | \$0.00 | \$ 300.00 100% of fair market value, up to any applicable statutory limit | Ariz. Rev. Stat. § 33-1126 (A)(9) |
| Brief | Securit ription: | y deposit on rental unit (Security Deposits) | \$ <u>5</u> 50.00 | \$\frac{2,000.00}{100\% of fair market value, up to any applicable statutory limit | Ariz. Rev. Stat. § 33-1126 (C), § 33-1321 (A) |
| Brief desc | filing da ription: | 22 I but unpaid wages owed to Debtor as of pet ate (owed to debtor) | tition \$Unknown | \$\frac{75\%}{100\% \text{ of fair market value, up to any applicable statutory limit} | Ariz. Rev. Stat. § 33-1131 |
| Line Sche | trom edule A/B: | 30 | | any applicable statutory limit | |
| Brief desc Line | ription: | | \$ | \$ \$ 100% of fair market value, up to any applicable statutory limit | |
| Sche Brief | edule A/B: | | \$ | <u></u> \$ | |
| Line Sche | from edule A/B: | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief desc | ription: | | \$ | \$100% of fair market value, up to | |
| Line Sche | from edule A/B: | | | any applicable statutory limit | |
| | ription: | | \$ | \$100% of fair market value, up to | |
| | edule A/B: | | | any applicable statutory limit | |
| | ription: | | \$ | \$\\$100% of fair market value, up to | |
| Line Sche | from edule A/B: | | | any applicable statutory limit | |
| | ription: | | \$ | \$100% of fair market value, up to any applicable statutory limit | |
| | edule A/B: | | | | |
| Brief desc | ription: | | \$ | \$\$100% of fair market value, up to | |
| Line Sche | from edule A/B: | | | any applicable statutory limit | |

| Fill in this information to identify your cas | e: | | | |
|---|---|-----------------------|----------------------|---------------|
| Angelica Marie Wills | | | | |
| Debtor 1 First Name Middle N | Name Last Name | | | |
| Debtor 2 | | | | |
| (Spouse, if filing) First Name Middle N | Name Last Name | | | |
| United States Bankruptcy Court for the: District of A | Arizona | | | |
| Case number 2:18-bk-13149 | • • | | | |
| (If known) | | | | if this is an |
| | | | ameno | ed filing |
| Official Form 106D | | | | |
| Official Fortil 100D | | | | |
| Schedule D: Creditor | s Who Have Claims Secur | ed by Pro | perty | 12/15 |
| Ro as complete and accurate as nossible | If two married people are filing together, both are e | rually responsible | for supplying correc | t |
| | y the Additional Page, fill it out, number the entries, | | | |
| additional pages, write your name and cas | se number (if known). | | • | • |
| | | | | |
| 1. Do any creditors have claims secured by | | | Aleka Carres | |
| | m to the court with your other schedules. You have noth | ing else to report on | this form. | |
| Yes. Fill in all of the information below. | | | | |
| Part 1: List All Secured Claims | | | | |
| Eist All Secured Claims | | Column A | Column B | Column C |
| 2. List all secured claims. If a creditor has n | nore than one secured claim, list the creditor separately | Amount of claim | Value of collateral | Unsecured |
| | as a particular claim, list the other creditors in Part 2. | Do not deduct the | that supports this | portion |
| | nabetical order according to the creditor's name. | value of collateral. | claim | If any |
| 2.1 Dynasty Finance Inc | Describe the property that secures the claim: | \$_9,366.00 | \$ 2,289.00 | \$_7,077.00 |
| | 2007 Toyota Corolla - \$2,289.00 | | `l | |
| Creditor's Name | | | | |
| 4850 W Glendale Ave | | | | |
| Namber Cheek | | | | |
| | As of the date you file, the claim is: Check all that apply | | | |
| Glendale AZ 85301 | Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| Who owes the debt? Check one. Debtor 1 only | ☐ Disputed | | | |
| Debtor 1 only Debtor 2 only | Nature of lien. Check all that apply. | | | |
| Debtor 1 and Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| At least one of the debtors and another | Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ Check if this claim relates to a | ☐ Judgment lien from a lawsuit | | | |
| community debt | Other (including a right to offset) | _ | | |
| Date debt was incurred 2018 2.2 Progressive Leasing | Last 4 digits of account number 1201 | | | |
| | Describe the property that secures the claim: | \$ Unknown | \$ 300.00 | \$ Unknown |
| Creditor's Name | Bed frame and chair - \$300.00 | | | |
| 256 W Data Drive | | | | |
| Number Street | | | | |
| | | | | |
| Phoenix AZ 85020 | As of the date you file, the claim is: Check all that apply Contingent | • | | |
| City State ZIP Code | Unliquidated | | | |
| Who owes the debt? Check one. | Disputed | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | ☐ An agreement you made (such as mortgage or secured | | | |
| Debtor 1 and Debtor 2 only | car loan) | | | |
| At least one of the debtors and another | Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ Check if this claim relates to a | Judgment lien from a lawsuit | | | |
| community debt Date debt was incurred | Other (including a right to offset) Last 4 digits of account number | _ | | |
| | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

Case 2:18-bk-13149-EPB Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12 Desc

Official Form 106D Schedule Maignifico Winn Have Claim Speuded by Figority page 1 of 1

Angelica Marie Wills Last Name Middle Name

| Part 2: | List Others to Be Notified for a Debt That You Already Listed |
|---------------------------|--|
| agency is t you have m | ige only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection rying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if nore than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to |
| I 4:£:I | fan ann daluta in Bant A. da mat fill ant an amhreit this man |

| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | 56 | notined for any debts in Fart 1, do not fin of | it of oubline time | o pago. | |
|--|--------|--|--------------------|----------|---|
| Street City State ZIP Code On which line in Part 1 did you enter the creditor? | | | | | |
| City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | Name | | | Last 4 digits of account number |
| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | Street | | | |
| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | | | | |
| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? | _ | City | State | ZIP Code | |
| Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | | | | |
| City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | Name | | | East 4 digits of account number |
| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | Street | | | |
| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | | | | |
| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number | _ | City | State | ZIP Code | On which line in Part 4 did you entenths avaditor? |
| Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | - | | | |
| City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number City Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | Name | | | |
| On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | Street | | | |
| On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | | | | |
| City State ZIP Code | \neg | City | State | ZIP Code | On which line in Part 1 did you enter the creditor? |
| Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | | | | |
| City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | Name | | | East 4 digits of account number |
| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | Street | | | |
| Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | | | | |
| City State ZIP Code City State ZIP Code City State City Cit | _ | City | State | ZIP Code | |
| Street City State ZIP Code On which line in Part 1 did you enter the creditor? | | | | | |
| City State ZIP Code On which line in Part 1 did you enter the creditor? | | Name | | | Last 4 digits of account number |
| On which line in Part 1 did you enter the creditor? | | Street | | | |
| On which line in Part 1 did you enter the creditor? | | | | | |
| Last 4 digits of account number | | City | State | ZIP Code | |
| Name Last 4 digits of account number | | | | | |
| | | Name | | | Last 4 digits of account number |
| Street | | Street | | | |
| | | | | | |
| City State ZIP Code Case 2:19 bk 12140 EDB Doe 10 Filed 11/12/19 Entered 11/12/19 17:19:12 Does | | | | | |

| Fill in this is | nformation to identify yo | NIK 00001 | | | | | | |
|--------------------------------|---|------------------------|------------------|---|---------------------------|-----------------------|-----------------------|--------------------|
| FIII III UIIS II | mormation to identity yo | our case. | | | | | | |
| Debtor 1 | Angelica Marie Wills | | | | | | | |
| Dobtor 2 | First Name | Middle Name | | Last Name | | | | |
| Debtor 2 (Spouse, if filing |) First Name | Middle Name | | Last Name | | | | |
| United States | Bankruptcy Court for the: Di | strict of Arizona | | | | | | |
| | | | | | | | Check | if this is an |
| Case number (If known) | 2:18-bk-13149 | | | - | | | amend | led filing |
| 0.66 | - 400F/F | | | | _ | | | |
| - | Form 106E/F | ditoro W | /ha l | Have Unsec | urad Clain | 2.0 | | 4044 |
| Scried | ule E/F. Clet | IIIOIS W | /110 1 | nave Unsec | ureu Ciain | 15 | | 12/15 |
| • | • | | | editors with PRIORITY of | | | | |
| | | | | d leases that could resu Executory Contracts and | | | | |
| creditors wit | h partially secured claim | ns that are liste | ed in <i>Scl</i> | hedule D: Creditors Who | o Have Claims Secui | red by Property | . If more space | is |
| | / the Part you need, fill i al pages, write your nam | | | ies in the boxes on the l · known). | eft. Attach the Conti | nuation Page to | o this page. On | tne top of |
| Part 1: Li | st All of Your PRIOR | TY Unsecure | ` ed Claiı | ms | | | | |
| 4 Do any or | editors have priority un | accured eleime | o ogoino | 21 you? | | | | |
| | o to Part 2. | secureu ciairis | s ayanıs | st you! | | | | |
| ✓ Yes. | 0 10 1 411 2. | | | | | | | |
| | your priority unsecured | d claims. If a cre | editor ha | as more than one priority i | unsecured claim, list t | he creditor sepa | rately for each of | claim. For |
| nonpriority | amounts. As much as po | ossible, list the o | claims in | has both priority and nong alphabetical order accord f more than one creditor h | ding to the creditor's r | ame. If you have | e more than two | priority |
| (For an ex | xplanation of each type of | claim, see the in | nstructio | ons for this form in the inst | truction booklet.) | | | |
| | | | | | | Total claim | Priority amount | Nonpriority amount |
| Arizona 2.1 | Department of Revenue | | | | | | | |
| | | | Last 4 | digits of account numbe | r | _{\$} Unknown | \$ Unknown | \$Unknown |
| | ditor's Name ection Division | | When | was the debt incurred? | Notice Only | | | |
| Number | Street | | | | | | | |
| P O Box | ¢ 29070 | | As of | the date you file, the clair | m is: Check all that appl | y. | | |
| City | Chata | 85038-9070 ZIP Code | | ontingent | | | | |
| City | State | | | nliquidated | | | | |
| Debto | urred the debt? Check one or 1 only | | | sputed of PRIORITY unsecured | l claim: | | | |
| Debto | • | | | omestic support obligations | | | | |
| | or 1 and Debtor 2 only | | ✓ Ta | axes and certain other debts y | ou owe the government | | | |
| _ | st one of the debtors and and | | | aims for death or personal inj | ury while you were | | | |
| | k if this claim is for a com | imunity debt | _ | toxicated ther. Specify | | | | |
| Is the cla | aim subject to offset? | | | , , , | | | | |
| yes I IRS | | | | | | | | |
| 2.2 IRS | | | Last 4 | I digits of account numbe | r | _{\$} Unknown | _{\$} Unknown | s Unknown |
| Priority Cr | editor's Name | | When | was the debt incurred? | Notice Only | * | _ * | <u> </u> |
| PO Box | c 7346 | | | | | | | |
| Number | Street | | _ | the date you file, the clair | m is: Check all that appl | y. | | |
| Philade | elphia PA | 19101 | | ontingent nliquidated | | | | |
| City | State | ZIP Code | | sputed | | | | |
| Who ind | curred the debt? Check one | 9. | | • | l alaim: | | | |
| _ | or 2 only | | | of PRIORITY unsecured omestic support obligations | ı cıaım: | | | |
| | or 1 and Debtor 2 only | | | exes and certain other debts y | ou owe the government | | | |
| ☐ At lea | ast one of the debtors and and | other | | aims for death or personal inj | - | | | |
| ☐ Ched | ck if this claim is for a con | nmunity debt | | toxicated | - | | | |

3 Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12 sc**il/dain மூல் பாலை w**ho **பிழைக்கியன் 56**ims ^{Yes} Case 2:18-bk-13149-EPB Desc

Other. Specify

✓ No

Is the claim subject to offset?

| ď | | ς. |
|----|----|------------|
| пα | п. | ~ . |

| | Do any creditors have nonpriority unsecured No. You have nothing to report in this part. S Yes | | | |
|-----|--|----------------------|--|-----------------------|
| | nonpriority unsecured claim, list the creditor sepa | arately for each cla | al order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do not a, list the other creditors in Part 3.If you have more than three no | list claims already |
| | 1 Stop Money Center | | | Total claim |
| 4.1 | | | Last 4 digits of account number | |
| | Nonpriority Creditor's Name | | _ | \$ Unknown |
| | 4385 W. Bell Rd. | | When was the debt incurred? | |
| | Number Street | | = | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Glendale AZ | 85308 | Contingent | |
| | City State | ZIP Code | ☐ Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | |
| | ✓ No | | | |
| | Yes | | | |
| 1.2 | ACE Cash Express Inc. | | Last 4 digits of account number | <u>\$Unknown</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 5804 W Camelback Rd. Ste. A | | _ | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Glendale AZ | 05001 | Contingent | |
| | Glendale AZ City State | 85301 ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | | ☐ Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | |
| | ✓ No | | | |
| | Yes Arizona Federal Credit Union | | | |
| 4.3 | | | Last 4 digits of account number | _{\$} Unknown |
| | Nonpriority Creditor's Name | | When was the debt incurred? | <u> </u> |
| | 5151 N. 19th Avenue | | _ | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Phoenix AZ | 85082 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | |
| | ✓ No Yes | | | |

Debtor 1

Angelica Marie Wills
First Name Middle Name Last Name

| | Do any creditors have nonpriority unsection No. You have nothing to report in this p ✓ Yes | | = - | | | |
|------|--|----------|------------------------|---|----------------------------------|---------------------|
| | List all of your nonpriority unsecured cla nonpriority unsecured claim, list the credito ncluded in Part 1. If more than one credito claims fill out the Continuation Page of Par | r separ | ately for each claim | . For each claim listed, identify what | at type of claim it is. Do not | list claims already |
| | | | | | | Total claim |
| 4.4 | Cap One | | | | 2000 | |
| | Nonpriority Creditor's Name | | | Last 4 digits of account number | 3980 | \$ 0.00 |
| | Po Box 5253 | | | When was the debt incurred? | 2009 | |
| | Number Street | | | | | |
| | | | | | | |
| | Carol Stream IL | | 60197 | As of the date you file, the claim | is: Check all that apply. | |
| | City Sta | | ZIP Code | ☐ Contingent | | |
| | Who incurred the debt? Check one. | | | Unliquidated | | |
| | Debtor 1 only | | | ☐ Disputed | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecu | red claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | | |
| | At least one of the debtors and another | | | Obligations arising out of a separ that you did not report as priority | | |
| | ☐ Check if this claim is for a community | , dobt | | Debts to pension or profit-sharing | | |
| | | uebi | | ✓ Other. Specify | | |
| | Is the claim subject to offset? | | | | | |
| | ✓ No ☐ Yes | | | | | |
| 4.5 | Cap One | | | 1 4 4 4!!4 4 | 3633 | \$3,396.00 |
| +.5 | | | | Last 4 digits of account number When was the debt incurred? | 2013 | \$0,000.00 |
| | Nonpriority Creditor's Name | | | when was the debt incurred? | 2013 | |
| | Po Box 85015 Number Street | | | | | |
| | Number Street | | | As of the date you file, the claim | is: Check all that apply. | |
| | Disharand | ^ | 00005 5075 | ☐ Contingent | | |
| | Richmond V | A ate | 23285-5075 ZIP Code | ☐ Unliquidated | | |
| | Who incurred the debt? Check one. | | 2 0000 | Disputed | | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecu | red claim: | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | | | Student loans | | |
| | At least one of the debtors and another | | | Obligations arising out of a separ | • | |
| | | | | that you did not report as priority Debts to pension or profit-sharing | | |
| | Check if this claim is for a community | debt | | Other. Specify | g plans, and other similar debts | |
| | Is the claim subject to offset? | | | ce spee, | | |
| | ✓ No | | | | | |
| 1.6 | Yes | | | | FF04 | |
| +.0 | Cap One | | | Last 4 digits of account number | | \$3,368.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | 2014 | - |
| | Po Box 85015 | | | | | |
| | Number Street | | | As of the data you file the claim | in. Check all that apply | |
| | Bill | | 20005 5075 | As of the date you file, the claim | is. Check all that apply. | |
| | Richmond V | A ate | 23285-5075 ZIP Code | Contingent | | |
| | Who incurred the debt? Check one. | ato | 211 3000 | Unliquidated | | |
| | Debtor 1 only | | | Disputed | and alabase | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecu | ired ciaim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | | Student loans | otion correct " | |
| | | | | Obligations arising out of a separ that you did not report as priority | | |
| | ☐ Check if this claim is for a community | debt | | Debts to pension or profit-sharing | | |
| | Is the claim subject to offset? | | | ✓ Other. Specify | | |
| | <u>✓</u> No | | | | | |
| | Yes | | | | | |

Angelica Marie Wills Last Name

| Pal | | ο. | |
|-----|-----|----|--|
| пα | II. | 4. | |

| | Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes | | | | |
|-----|--|-----------------------|---|----------------------------------|-----------------------|
| | List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor sepa included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2. | rately for each claim | n. For each claim listed, identify wha | at type of claim it is. Do not | list claims already |
| | | | | | Total claim |
| 4.7 | Cap1/Bstby | | | 0500 | 100010101111 |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | 9500 | \$ 0.00 |
| | Po Box 30253 | | When was the debt incurred? | 2013 | |
| | Number Street | | | | |
| | | | | | |
| | Salt Lake City UT | 04100 | As of the date you file, the claim | is: Check all that apply. | |
| | Salt Lake City UT City State | 84130 ZIP Code | ☐ Contingent | | |
| | , | ZIF Code | ☐ Unliquidated | | |
| | Who incurred the debt? Check one. | | ☐ Disputed | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecu | ıred claim: | |
| | Debtor 2 only | | ☐ Student loans | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | ☐ Obligations arising out of a separ | ation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority | | |
| | ☐ Check if this claim is for a community debt | | ☐ Debts to pension or profit-sharing ☐ Other. Specify | g plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.8 | Capital One | | Last 4 digits of account number | 5942 | \$0.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | 2012 | |
| | 11013 W Broad St | | | | |
| | Number Street | | | | |
| | | | As of the date you file, the claim | is: Check all that apply. | |
| | Glen Allen VA | 23060 | ☐ Contingent | | |
| | City State | ZIP Code | ☐ Unliquidated | | |
| | Who incurred the debt? Check one. | | ☐ Disputed | | |
| | ☑ Debtor 1 only ☐ Debtor 2 only | | Type of NONPRIORITY unsecu | ıred claim: | |
| | Debtor 1 and Debtor 2 only | | ☐ Student loans | | |
| | At least one of the debtors and another | | Obligations arising out of a separ | • | |
| | _ | | that you did not report as priority Debts to pension or profit-sharing | | |
| | ☐ Check if this claim is for a community debt | | Other. Specify | | |
| | Is the claim subject to offset? | | _ outer. opening | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.9 | Capital One | | Last 4 digits of account number | | _{\$} Unknown |
| | Nonpriority Creditor's Name | | When was the debt incurred? | | \$ <u>OHKHOWH</u> |
| | General Corr/Bankruptcy | | | | |
| | Number Street | | | | |
| | PO Box 30285 | | As of the date you file, the claim | is: Check all that apply. | |
| | Salt Lake City UT | 84130 | ☐ Contingent | | |
| | City State Who incurred the debt? Check one. | ZIP Code | ☐ Unliquidated | | |
| | Debtor 1 only | | Disputed | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecu | ıred claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | At least one of the debtors and another | | Obligations arising out of a separ | | |
| | ☐ Check if this claim is for a community debt | | that you did not report as priority | | |
| | • | | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | ✓ No | | | | |
| | Yes | | | | |

| Da | | 2 | н |
|----|----|---|---|
| пα | п. | ~ | н |

| 3. | Do any creditors have nonpriority unsecured on the No. You have nothing to report in this part. Surely Yes | | | |
|------|--|--------------------|---|------------------------|
| 4. | nonpriority unsecured claim, list the creditor separ | ately for each cla | al order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not not, list the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | Total claim |
| 4.10 | Capitalone | | Last 4 digits of account number | 0.000.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? 2014 | \$3,368.00 |
| | 15000 Capital One Dr Number Street | | when was the debt incurred? 2014 | |
| | Number Street | | | |
| | Richmond VA | 23238 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | ─ Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | ✓ No | | | |
| | ☐ Yes | | | 0.00 |
| 4.1° | Capitalone | | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? 2012 | |
| | 15000 Capital One Dr | | _ | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Richmond VA | 23238 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | | ☐ Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | <u>✓</u> No | | | |
| | └── Yes | | | |
| 4.12 | Capitalone | | Last 4 digits of account number | _{\$} 3,396.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? 2013 | * _ |
| | 15000 Capital One Dr | | _ | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Richmond VA | 23238 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | ☐ Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | ✓ No | | | |
| | Yes | | | |
| | | | | |

| Da | | 9 | н |
|----|----|---|---|
| пα | rt | ~ | н |

| 3. | Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes | | | |
|------|--|----------------------|---|---------------------|
| | nonpriority unsecured claim, list the creditor sepa | rately for each clai | order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | Total claim |
| 4.13 | Cash1 | | Last 4 digits of account number | |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | \$_Unknown |
| | 4246 W Nothern Ave. | | When was the debt incurred? | |
| | Number Street | | • | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Phoenix AZ | 85051 | _ | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | ☐ Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | ✓ No | | | |
| | Yes | | | |
| 4.14 | 01.0.0 | | Last 4 digits of account number 2342 | \$ 0.00 |
| | | | When was the debt incurred? 2013 | * |
| | Nonpriority Creditor's Name 220 W Schrock Rd | | | |
| | Number Street | | - | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Westerville OH | 43081 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | | ☐ Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | Charle if this plains in face a community dobt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Check if this claim is for a community debt | | Other. Specify | |
| | Is the claim subject to offset? | | | |
| | Yes | | | |
| 4.15 | Chase Card | | Last 4 digits of account number | |
| | <u> </u> | | When was the debt incurred? 2016 | \$ <u>1,172.00</u> |
| | Nonpriority Creditor's Name Po Box 15298 | | when was the debt incurred: 2010 | |
| | Number Street | | - | |
| | Number Circle | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE | 19850 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | ☐ Student loans | |
| | At least one of the debtors and another | | ☐ Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a community debt | | that you did not report as priority claims | |
| | • | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | ✓ No | | | |
| | ☐ Yes | | | |

| Da | | 2 | н |
|----|----|---|---|
| пα | п. | ~ | н |

List All of Your NONPRIORITY Unsecured Claims

| 3. | Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes | | | |
|------|--|---------------------|---|-----------------------|
| | nonpriority unsecured claim, list the creditor sepa | rately for each cla | al order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not not not the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | Total claim |
| 4.16 | CheckSmart | | land delimite of an arms arms are | |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | \$ Unknown |
| | 3510-8 W Bell Rd. | | When was the debt incurred? | |
| | Number Street | | _ | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Glendale AZ | 85308 | — Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | ✓ Debtor 1 only | | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | ☐ Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | ✓ No | | | |
| | Yes | | | |
| 4.17 | Checkmate Express Corporation | | Last 4 digits of account number | _{\$} Unknown |
| | Nonpriority Creditor's Name | | — When was the debt incurred? | |
| | 8076 N. 19th Avenue | | | |
| | Number Street | | As of the date you file the plains in Charle III that south | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Phoenix AZ | 85021 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | <u> </u> | |
| | ☐ Debtor 1 and Debtor 2 only | | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | No | | | |
| | Yes | | | |
| 4.18 | Citibank/Best Buy | | Last 4 digits of account number 9500 | 1 100 10 |
| | | | When was the debt incurred? | \$ <u>1,100.12</u> |
| | Nonpriority Creditor's Name P.O. Box 790441 | | Then was the dest mounted. | |
| | Number Street | | _ | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Saint Louis MO | 63179 | ☐ Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | ☐ Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | ✓ No | | • • | |
| | Yes | | | |
| | | | | |

Case 2:18-bk-13149-EPB Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12 Desc

| Б. | | Ο. |
|-----|-----|----|
| 124 | rt. | |
| | | |

List All of Your NONPRIORITY Unsecured Claims

| | Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes | = - | | |
|------|--|-----------------------|--|-----------------------|
| | nonpriority unsecured claim, list the creditor sepa | rately for each claim | order of the creditor who holds each claim. If a creditor has a property is a creditor has a creditor has a creditor has a creditor and creditor has a credi | list claims already |
| | | | | Total claim |
| 4.19 | Comenitybank/Victoria | | Last 4 digits of account number | |
| | Nonpriority Creditor's Name | | | <u>\$</u> 0.00 |
| | Po Box 182789 | | When was the debt incurred? 2013 | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Columbus OH | 43218 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | | ☐ Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | _ | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Check if this claim is for a community debt | | U Other. Specify | |
| | Is the claim subject to offset? | | | |
| | ✓ No | | | |
| 4.00 | ☐ Yes Cox Communications | | | Linkson |
| 4.20 | Cox Communications | | Last 4 digits of account number | _{\$} Unknown |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | | | | |
| | Number Street 6205-B Peachtree Dunwoody Road NE | | As of the date you file, the claim is: Check all that apply. | |
| | | | ☐ Contingent | |
| | Atlanta GA City State | 30328 ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | ZIF Code | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | | ☐ Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Check if this claim is for a community debt | | ✓ Other. Specify | |
| | Is the claim subject to offset? | | _ culor opcony | |
| | ✓ No ☐ Yes | | | |
| 1.21 | | | Last 4 digits of account number 0255 | |
| 1.21 | Diamond Resorts Fs | | East + digits of associate names | \$ <u>7,055.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? 2016 | |
| | 10600 W Charleston Blvd | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Las Vegas NV | 89135 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | ☐ Disputed | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | ☐ Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | V No Yes | | | |
| | | | | |

Case 2:18-bk-13149-EPB Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12 Desc

| н |
|---|
| |

Official Form 106E/F

| | Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes | | | | |
|------|--|-----------------------|--|----------------------------------|---------------------|
| | List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor sepa included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2. | rately for each claim | . For each claim listed, identify wha | at type of claim it is. Do not | list claims already |
| | | | | | Total claim |
| 4.22 | Employees Credit Union | | | | |
| +.∠∠ | Nonpriority Creditor's Name | | Last 4 digits of account number | 7230 | _{\$} 0.00 |
| | · · · | | When was the debt incurred? | 2013 | φ |
| | 2714 Central Ave Number Street | | When was the dest meaned. | | |
| | Number Street | | | | |
| | | | As of the date you file, the claim | is: Check all that apply. | |
| | Estherville IA | 51334 | _ | ioi oncon un mar apprij. | |
| | City State | ZIP Code | Contingent | | |
| | Who incurred the debt? Check one. | | Unliquidated | | |
| | Debtor 1 only | | ☐ Disputed | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecu | red claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | At least one of the debtors and another | | Obligations arising out of a separ that you did not report as priority | ation agreement or divorce | |
| | | | Debts to pension or profit-sharing | | |
| | ☐ Check if this claim is for a community debt | | U Other. Specify | g plans, and other similar debts | |
| | Is the claim subject to offset? | | _ outen opening | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.23 | Employees Cu | | Last 4 digits of account number | 7130 | \$ <u>0.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | 2012 | |
| | 21 South 1st St | | | | |
| | Number Street | | | | |
| | | | As of the date you file, the claim | is: Check all that apply. | |
| | Estherville IA | | ☐ Contingent | | |
| | City State | ZIP Code | ☐ Unliquidated | | |
| | Who incurred the debt? Check one. | | ☐ Disputed | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecu | red claim: | |
| | Debtor 2 only | | ☐ Student loans | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | ☐ Obligations arising out of a separ | | |
| | At least one of the debtors and another | | that you did not report as priority | | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing | | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 1.24 | Finfit | | Last 4 digits of account number | 3085 | 1 100 00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | 2018 | \$ <u>1,138.00</u> |
| | 272 Bendix Rd #525 | | Tillon was the dest mounted. | | |
| | Number Street | | | | |
| | | | As of the date you file, the claim | is: Check all that apply. | |
| | Virginia Beach VA | 23452 | ☐ Contingent | | |
| | City State | ZIP Code | Unliquidated | | |
| | Who incurred the debt? Check one. | | Disputed | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecu | red claim: | |
| | Debtor 2 only | | | iioa ciaiiii. | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | ☐ Student loans ☐ Obligations arising out of a separ | ation agreement or division | |
| | | | Obligations arising out of a separ that you did not report as priority | | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing | | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | ✓ No | | | | |
| | Yes | | | | |
| | | | | | |

| Part | ം. |
|------|----|

Official Form 106E/F

List All of Your NONPRIORITY Unsecured Claims

| 3. | Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Surely Yes | = - | | |
|------|--|-----------------------|---|-----------------------|
| 4. | nonpriority unsecured claim, list the creditor sepa | rately for each clair | order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | : list claims already |
| | | | | Total claim |
| 4.25 | Green Trust Cash | | Last 4 digits of account number | |
| | Nonpriority Creditor's Name | | | _{\$} Unknown |
| | PO Box 340 Number Street | | When was the debt incurred? | |
| | Number Street | | | |
| | Hays MT | 59527 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | ☐ Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify | |
| | Is the claim subject to offset? | | _ Guidi. Spoony | |
| | ✓ No | | | |
| 4.26 | ☐ Yes JP Morgan Chase Bank, NA | | | _{\$} Unknown |
| +.2(| 1 | | Last 4 digits of account number When was the debt incurred? | \$ OTHER TOWN |
| | Nonpriority Creditor's Name P O Box 15298 | | - Wileli was the dest incurred: | |
| | Number Street | - | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE | 19850 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | ☐ Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | ☐ Debts to pension or profit-sharing plans, and other similar debts☑ Other. Specify | |
| | Is the claim subject to offset? | | | |
| | ✓ No Yes | | | |
| 1.27 | | | Last 4 digits of account number | _{\$} Unknown |
| | Nonpriority Creditor's Name | | When was the debt incurred? | \$ <u>UIIKIIUWII</u> |
| | 71 Stevenson St | | | |
| | Number Street | | As after date one file the claim is Ober 1 1111 at and | |
| | Ste 300 | 04105 | As of the date you file, the claim is: Check all that apply. | |
| | San Francisco CA City State | 94105 ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | ☐ Unliquidated ☐ Disputed | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | U Other. Specify | |
| | ✓ No | | | |
| | Yes | | | |
| | | | | |

Case 2:18-bk-13149-EPB Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12 Desc

| Daut | ς. |
|------|----|
| Part | |

| | Do any creditors have nonpriority unsecured No. You have nothing to report in this part. S Yes | _ | | | |
|------|--|---------------------|---|-----------------------|--|
| | nonpriority unsecured claim, list the creditor sep | parately for each c | cal order of the creditor who holds each claim. If a creditor has claim. For each claim listed, identify what type of claim it is. Do not im, list the other creditors in Part 3.If you have more than three no | : list claims already | |
| | | | | Total claim | |
| 4.28 | Lendingclu | | | 100010101111 | |
| +.20 | Nonpriority Creditor's Name | | Last 4 digits of account number 3522 | _{\$} 0.00 | |
| | 71 Stevenson Pl. Ste # 300 | | When was the debt incurred? 2016 | Ψ | |
| | Number Street | | | | |
| | Number Street | | | | |
| | | | As of the date you file, the claim is: Check all that apply. | | |
| | San Francisco CA | 94105 | _ | | |
| | City State | ZIP Code | Contingent | | |
| | Who incurred the debt? Check one. | | Unliquidated | | |
| | Debtor 1 only | | ☐ Disputed | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | ☐ At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | | | Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Check if this claim is for a community deb | t | Other. Specify | | |
| | Is the claim subject to offset? | | E outer. opeony | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.29 | Medical Payment Data | | Last 4 digits of account number 9211 | \$498.00 | |
| | | | — When was the debt incurred? 2017 | | |
| | Nonpriority Creditor's Name PO Box 94498 | | | | |
| | Number Street | | <u> </u> | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | | |
| | | | Contingent | | |
| | Las Vegas NV | 89193 | — Unliquidated | | |
| | City State Who incurred the debt? Check one. | ZIP Code | ☐ Disputed | | |
| | ☑ Debtor 1 only | | Type of NONPRIORITY unsecured claim: | | |
| | Debtor 2 only | | | | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | ☐ At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ☐ Check if this claim is for a community deb | • | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Check it this claim is for a community deb | | Other. Specify | | |
| | Is the claim subject to offset? | | _ , , | | |
| | No | | | | |
| 4.00 | Yes | | | | |
| 4.30 | Medical Payment Data | | Last 4 digits of account number 1622 | _{\$} 337.00 | |
| | Nonpriority Creditor's Name | | When was the debt incurred? 2017 | φ <u>σσ7.σσ</u> | |
| | 326 E Coronado Rd | | | | |
| | Number Street | | | | |
| | | | As of the date you file, the claim is: Check all that apply. | | |
| | Phoenix AZ | 85004 | □ Contingent | | |
| | City State | ZIP Code | Unliquidated | | |
| | Who incurred the debt? Check one. | | ☐ Disputed | | |
| | Debtor 1 only | | • | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ☐ Check if this claim is for a community deb | t | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Is the claim subject to offset? | | ✓ Other. Specify | | |
| | No | | | | |
| | Yes | | | | |
| | | | | | |

Angelica Marie Wills Middle Name Last Name

| Daut | ς. |
|------|----|
| Part | |

| | Do any creditors have nonpriority unsecured of No. You have nothing to report in this part. Su Yes | | | | |
|--------|---|-----------------------|--|----------------------------------|---------------------|
| l i | List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor sepa ncluded in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2. | rately for each claim | . For each claim listed, identify wh | at type of claim it is. Do not | list claims already |
| | | | | | Total claim |
| 4.31 | Portfolio | | Last 4 digits of account number | 9500 | |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | | \$ <u>1,070.00</u> |
| | 120 Corporate Blvd, Ste 1 | | When was the debt incurred? | 2017 | |
| | Number Street | | | | |
| | | | As of the date you file, the claim | is: Check all that apply | |
| | Norfolk VA | 23502 | _ | 13. Oneok all triat appry. | |
| | City State | ZIP Code | ☐ Contingent | | |
| | Who incurred the debt? Check one. | | ☐ Unliquidated☐ Disputed | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecu | ıred claim: | |
| | Debtor 2 only | | Student loans | aroa olalii. | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separate of the separate of | ration agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority | claims | |
| | $\hfill\Box$ Check if this claim is for a community debt | | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.32 | Portfolio Recov Assoc | | Last 4 digits of account number | 9500 | \$ <u>1,070.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | 2017 | |
| | 120 Corporate Blvd Ste 1 | | | | |
| | Number Street | | As of the date you file, the claim | is: Check all that apply | |
| | | | <u> </u> | 13. Oncok all that appry. | |
| | Norfolk VA | 23502 | Contingent | | |
| | City State Who incurred the debt? Check one. | ZIP Code | ☐ Unliquidated☐ Disputed | | |
| | ☑ Debtor 1 only | | Type of NONPRIORITY unsecu | ıred claim: | |
| | Debtor 2 only | | Student loans | aroa olalii. | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separ | ration agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority | | |
| | $\hfill\Box$ Check if this claim is for a community debt | | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | ✓ No | | | | |
| 4 00 | Yes | | | | |
| 4.33 | Presto Auto Loans | | Last 4 digits of account number | 5908 | \$1,163.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | 2016 | Ψ |
| | 2641 W Indian School Rd | | | | |
| | Number Street | | As of the date you file, the claim | ie: Chack all that apply | |
| | Phoenix AZ | 85017 | <u> </u> | 13. Oneok all triat appry. | |
| | City State | ZIP Code | Contingent | | |
| | Who incurred the debt? Check one. | | ☐ Unliquidated☐ Disputed | | |
| | Debtor 1 only | | • | ırad claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Type of NONPRIORITY unsecu | ii eu Ciaiiii. | |
| | At least one of the debtors and another | | ☐ Student loans ☐ Obligations arising out of a separ | ration agreement or divorce | |
| | | | that you did not report as priority | | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | No | | | | |
| | Yes | | | | |

| 3. | Do any creditors have nonpriority unsecured No. You have nothing to report in this part. So Yes | | | |
|------|--|----------------------|---|-----------------------|
| | nonpriority unsecured claim, list the creditor sepa | rately for each clai | order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | Total claim |
| 4.34 | Progressive Leasing | | Last 4 digits of account number | I halva avvua |
| | Nonpriority Creditor's Name | | When was the debt incurred? | _{\$} Unknown |
| | 256 W Dafa Drive Number Street | | when was the dept incurred? | |
| | Number Silect | | | |
| | Draper UT | 84020 | As of the date you file, the claim is: Check all that apply. | |
| | Draper UT City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | ✓ No | | | |
| | Yes | | | |
| 4.35 | Speedy Cash | | Last 4 digits of account number | \$Unknown |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 5819 W. Camelback Rd. | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | | |
| | Phoenix AZ | 85031 ZIP Code | ☐ Contingent ☐ Unliquidated | |
| | City State Who incurred the debt? Check one. | ZIP Gode | ☐ Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | ☐ Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Check if this claim is for a community debt | | U Other. Specify | |
| | Is the claim subject to offset? | | | |
| | ✓ No | | | |
| 4.36 | | | Last 4 digits of account number 0001 | |
| | · | | When was the debt incurred? 2014 | \$ <u>12,460.00</u> |
| | Nonpriority Creditor's Name Po Box 9786 | | When was the dept incurred? 2014 | |
| | Number Street | | - | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Cedar Rapids IA | 52409 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | ☐ Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | \square Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify | |
| | ✓ No | | | |
| | Yes | | | |

| Da | | 9 | н |
|----|----|---|---|
| пα | rt | ~ | н |

| | Do any creditors have nonpriority unsecured No. You have nothing to report in this part. Yes | | | | |
|--------|---|-------------------------|---|----------------------------------|-------------------------|
| l i | List all of your nonpriority unsecured claims nonpriority unsecured claim, list the creditor sepencluded in Part 1. If more than one creditor hole claims fill out the Continuation Page of Part 2. | parately for each clain | n. For each claim listed, identify wha | at type of claim it is. Do not | list claims already |
| | | | | | Total claim |
| 4.37 | Us Dept Of Ed/Glelsi Nonpriority Creditor's Name | | Last 4 digits of account number | 8581 | _{\$} 56,113.00 |
| | Po Box 7860 | | When was the debt incurred? 2013 | φ | |
| | Number Street | | | | |
| | | | | | |
| | Madison WI | 53707 | As of the date you file, the claim | is: Check all that apply. | |
| | City State | ZIP Code | Contingent | | |
| | Who incurred the debt? Check one. | | Unliquidated | | |
| | Debtor 1 only | | Disputed | urad alaimu | |
| | Debtor 2 only | | Type of NONPRIORITY unsecu | ired Claim: | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separ | ration agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority | | |
| | ☐ Check if this claim is for a community deb | t | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | No | | | | |
| | Yes | | | | |
| 4.38 | Velocity Investments LLC | | Last 4 digits of account number | | \$3,225.57 |
| | Nagariarita Carditaria Nagar | | When was the debt incurred? | | |
| | Nonpriority Creditor's Name 1800 NJ-34 #404a | | | | |
| | Number Street | | | | |
| | | | As of the date you file, the claim | is: Check all that apply. | |
| | Belmar NJ | 07719 | Contingent | | |
| | City State | ZIP Code | Unliquidated | | |
| | Who incurred the debt? Check one. Debtor 1 only | | ☐ Disputed | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecu | ired claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | ☐ At least one of the debtors and another | | Obligations arising out of a separ that you did not report as priority | | |
| | ☐ Check if this claim is for a community deb | • | Debts to pension or profit-sharing | | |
| | _ | • | Other. Specify | | |
| | Is the claim subject to offset? | | | | |
| | Yes | | | | |
| 4.39 | Wf Crd Svc | | Last 4 digits of account number | | \$0.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | 2009 | \$0.00 |
| | Po Box 14517 | | | | |
| | Number Street | | | | |
| | | | As of the date you file, the claim | is: Check all that apply. | |
| | Des Moines IA | 50306 | ☐ Contingent | | |
| | City State Who incurred the debt? Check one. | ZIP Code | ☐ Unliquidated | | |
| | Debtor 1 only | | Disputed | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecu | ıred claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | At least one of the debtors and another | | Obligations arising out of a separ | | |
| | ☐ Check if this claim is for a community deb | t | that you did not report as priority Debts to pension or profit-sharing | | |
| | Is the claim subject to offset? | | Other. Specify | g piano, ana otner similar uebts | |
| | No | | <u> </u> | | |
| | Yes | | | | |
| | | | | | |

| Part 2: | | | | | |
|---------|---|---|----|---|--|
| | | | | - | |
| | F | - | и. | _ | |
| | | | | | |

List All of Your NONPRIORITY Unsecured Claims

| | Do any creditors have nonpriority unsecured No. You have nothing to report in this part. So Yes | | | | |
|------|---|-----------------------|---|-----------------------------------|-----------------------|
| | List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor sepa included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2. | rately for each clain | n. For each claim listed, identify wha | at type of claim it is. Do not | list claims already |
| | | | | | Total claim |
| 4.40 | Wfb Cd Svc | | | | 10141014111 |
| 4.40 | | | Last 4 digits of account number | 8397 | _{\$} 0.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | 2009 | \$ 0.00 |
| | Credit Bureau Dispute Resolut, Po Box 14517 | | when was the debt incurred? | 2003 | |
| | Number Street | | | | |
| | | | A | : Observation to the state of | |
| | Des Moines IA | 50306 | As of the date you file, the claim | is: Check all that apply. | |
| | City State | ZIP Code | ☐ Contingent | | |
| | • | ZIF Code | ☐ Unliquidated | | |
| | Who incurred the debt? Check one. | | Disputed | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecu | red claim: | |
| | Debtor 2 only | | Student loans | irea ciaiiii. | |
| | ☐ Debtor 1 and Debtor 2 only | | | | |
| | ☐ At least one of the debtors and another | | Obligations arising out of a separ that you did not report as priority | ation agreement or divorce | |
| | | | Debts to pension or profit-sharing | | |
| | ☐ Check if this claim is for a community debt | | ✓ Other. Specify | g plane, and other ominar debte | |
| | Is the claim subject to offset? | | — Ситет. Оробиу | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.41 | Wff Cards | | Last 4 digits of account number | 3284 | \$ 0.00 |
| | | | When was the debt incurred? | 2008 | Ψ |
| | Nonpriority Creditor's Name | | when was the debt incurred: | 2000 | |
| | P.O. Box 51193 | | | | |
| | Number Street | | As of the date you file, the claim | is: Check all that apply. | |
| | | | | , | |
| | Los Angeles CA | 90051 | Contingent | | |
| | City State | ZIP Code | Unliquidated | | |
| | Who incurred the debt? Check one. Debtor 1 only | | ☐ Disputed | | |
| | | | Type of NONPRIORITY unsecu | ıred claim: | |
| | Debtor 2 only | | ☐ Student loans | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | ☐ Obligations arising out of a separ | | |
| | At least one of the deptors and another | | that you did not report as priority | | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | | |
| | ✓ No | | | | |
| | Yes | | | | |
| 1.42 | | | | | |
| | Zocaloans | | Last 4 digits of account number | | _{\$} Unknown |
| | Nonpriority Creditor's Name | | When was the debt incurred? | | |
| | 27565 Research Park Dr. | | | | |
| | Number Street | | | | |
| | PO Box 1147 | | As of the date you file, the claim | is: Check all that apply. | |
| | Mission SD | 57555 | Contingent | | |
| | City State | ZIP Code | ☐ Unliquidated | | |
| | Who incurred the debt? Check one. | | ☐ Disputed | | |
| | Debtor 1 only | | • | urad alaim: | |
| | Debtor 2 only | | Type of NONPRIORITY unsecu | ireu Cidiiii: | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | At least one of the debtors and another | | Obligations arising out of a separ | | |
| | ☐ Check if this claim is for a community debt | | that you did not report as priority Debts to pension or profit-sharing | | |
| | • | | Other. Specify | g piano, ana otner offilial debts | |
| | Is the claim subject to offset? | | Calci. Specify | | |
| | ✓ No | | | | |
| | Yes | | | | |

Case 2:18-bk-13149-EPB Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12 Desc

Part 3:

List Others to Be Notified About a Debt That You Already Listed

| OVC Financial | | | | | | |
|---|-------------|-------------------|---|--|--|--|
| CKS Financial | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name | | | 1. 438 ((2) /) 🗆 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15 | | | |
| PO Box 2856 | | | Line 4.38 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Clair | | | |
| Chesapeake | VA State | 23327 ZIP Code | Last 4 digits of account number 2521 | | | |
| Cap One | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name | | | Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | |
| 26525 N Riverwoods Blvd | | | | | | |
| Number Street | | | ✓ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Mettawa | IL State | 60045 ZIP Code | Last 4 digits of account number | | | |
| Cap1/Bstby | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name | | | | | | |
| | | | Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | |
| umber Street | | | ✓ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| | | | Last 4 digits of account number 3356 | | | |
| City | State | ZIP Code | . • | | | |
| Cap1/Bstby | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| 26525 N Riverwoods Blvd | | | Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | per Street | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Mettawa | IL | 60045 | Last 4 digits of account number | | | |
| City | State | ZIP Code | | | | |
| Cb/Vicscrt | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name | | | | | | |
| | | | Line 4.14 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | ✓ Part 2: Creditors with Nonpriority Unsecured | | | |
| | | | Claims | | | |
| Dib. | 04-4- | 710.0-1- | Last 4 digits of account number 2024 | | | |
| Oity On the Control | State | ZIP Code | | | | |
| Chase Card | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| 201 N. Walnut St//De1 1027 | | | Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | |
| 201 N. Wainut St//De1 102/ Number Street | | | | | | |
| varriber Street | | | ✓ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Wilmington | DE State | 19801 ZIP Code | Last 4 digits of account number 7702 | | | |
| Employees Credit Union | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name 2714 Central Ave | | | | | | |
| Number Street | | | Line 4.22 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | | |
| On Ot | | | ✓ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Estherville | IA | 51334 | Last 4 digits of account number 7130 | | | |
| City | State | ZIP Code | East 4 digits of account number | | | |

Debtor 1

Angelica Marie Wills Last Name

Part 3:

List Others to Be Notified About a Debt That You Already Listed

| Employees Credit Union | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
|------------------------------------|-------|----------|---|--|--|--|--|
| Name | | | 122 | | | | |
| 2714 Central Ave | | | Line 4.22 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Estherville IA 51334 | | 51334 | Last 4 digits of account number 7133 | | | | |
| City | State | ZIP Code | | | | | |
| Lendingclu | | | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.28 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Name 71 Stevenson Pl. Ste # 300 | | | | | | | |
| Number Street | | | | | | | |
| San Francisco | CA | 94105 | Last 4 digits of account number 8959 | | | | |
| City | State | ZIP Code | Last + digits of account number | | | | |
| Portfolio Recovery Ass | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| lame | | | Line 4.18 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | |
| 120 Corporate Blvd Ste 1 | | | ································ | | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Norfolk | VA | 23502 | Last 4 digits of account number | | | | |
| ity | State | ZIP Code | - | | | | |
| lame | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| ame | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | |
| Number Street | | | ☐ Part 2: Creditors with Nonpriority Unsecured | | | | |
| | | | Claims | | | | |
| Sity | State | ZIP Code | Last 4 digits of account number | | | | |
| | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| Name | | | | | | | |
| li serb se | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | |
| lumber Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | | | | | | | |
| City | State | ZIP Code | Last 4 digits of account number | | | | |
| | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| lame | | | _ | | | | |
| himber 2 | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | |
| lumber Street | | | ☐ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | | | | | | | |
| City | State | ZIP Code | Last 4 digits of account number | | | | |
| | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| lame | | | | | | | |
| lumber Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | |
| | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | | | Olaimo | | | | |
| ity | State | ZIP Code | Last 4 digits of account number | | | | |
| nty | Otato | 211 0000 | - | | | | |

Angelica Marie Wills Debtor 1

First Name Middle Name

Last Name

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim | |
|--------------|---|-----|-------------|-----------|
| Total claims | 6a. Domestic support obligations | 6a. | \$ | 0.00 |
| from Part 1 | 6b. Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | + \$ | 0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | Total claim | |
| Total claims | 6f. Student loans | 6f. | \$ | 56,113.00 |
| from Part 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | + \$ | 43,816.69 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$ | 99,929.69 |

| Fill in this information to identify your case: | | | | | | | |
|--|----------------------|-------------|-----------|--|--|--|--|
| Debtor | Angelica Marie Wills | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse If filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the District of Arizona | | | | | | | |
| Case number | 2:18-bk-13149 | | | | | | |
| (If known) | | | _ | | | | |

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with wh | om you | have the contract or | lease | ; | State what the contract or lease is | s for | |
|-----|----------------------------------|--------|----------------------|-----------------|-------|-------------------------------------|-------|--|
| 2.1 | Casa Bellisima Apartments | | | | Lease | on rental unit | | |
| | Name 6565 W Bethany Home Road | k | | | | | | |
| | Street Glendale | ΑZ | 85301 | | | | | |
| | City | State | ZIP Code | | | | | |
| 2.2 | | | | | | | | |
| | Name | | | | | | | |
| | Street | | | | | | | |
| | City | State | ZIP Code | | | | | |
| 2.3 | | | | | | | | |
| | Name | | | | | | | |
| | Street | | | | | | | |
| | City | State | ZIP Code | | | | | |
| 2.4 | | | | | | | | |
| | Name | | | | | | | |
| | Street | | | | | | | |
| | City | State | ZIP Code | | | | | |
| 2.5 | | | | | | | | |
| | Name | | | | | | | |
| | Street | | | | | | | |
| | City | State | ZIP Code | File of 4.4.4.6 | | Finterior of 11/10/10 17:10 | | |

| Fill in this in | formation to identify y | our case: | | | |
|------------------------------|---------------------------------|---|---------------------------------------|-------------------|---|
| Debtor 1 | Angelica Marie Wills | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: D | istrict of Arizona | | | |
| Case number (If known) | 2:18-bk-13149 | | · · · · · · · · · · · · · · · · · · · | , | Check if this is an |
| | | | | | amended filing |
| Official F | Form 106H | | | | |
| Schedi | ule H: Your | Codebtors | 3 | | 12/15 |
| are filing toge and number t | ether, both are equally | responsible for support on the left. Attach t | olying correct inf | ormation. If | as complete and accurate as possible. If two married people more space is needed, copy the Additional Page, fill it out, age. On the top of any Additional Pages, write your name and |
| 1. <u>Do</u> you h | ave any codebtors? (If | you are filing a joint o | ase, do not list eit | her spouse | as a codebtor.) |
| ∐ No | | | | | |
| Yes 2 Within th | ne last 8 vears, have vo | u lived in a commun | ity nronerty state | or territory | ? (Community property states and territories include |
| | | | | - | shington, and Wisconsin.) |
| _ | So to line 3. | | | | |
| | Did your spouse, former | spouse, or legal equi | valent live with yo | u at the time | ? |
| HN | | atata ar tarritar i did v | ou live? | | Fill in the name and ourrent address of that parson |
| | es. In which community | state or territory did y | ou live? | | Fill in the name and current address of that person. |
| <u> </u> | Name of your spouse, former spo | ouse, or legal equivalent | | | _ |
| 7 | Number Street | | | | - |
| <u> </u> | City | State | | ZIP Code | - |
| shown in Schedul | n line 2 again as a code | ebtor only if that pers o), <i>Schedule E/F</i> (Off | son is a guaranto | r or cosign | or if your spouse is filing with you. List the person er. Make sure you have listed the creditor on lule G (Official Form 106G). Use Schedule D, |
| Column | 1: Your codebtor | | | | Column 2: The creditor to whom you owe the debt |
| | | | | | Check all schedules that apply: |
| | d Olivas Jr. | | | | Schedule D, line 2.1 |
| Name 6565 | W Bethany Homes | s Rd. 245 | | | Schedule E/F, line |
| Street | | | | 05004 | Schedule G, line |
| Glen City | dale | AZ State | | 85301 ZIP Code | |
| 3.2 | | State | | | |
| Name | | | | | Schedule D, line |
| 6: . | | | | | Schedule E/F, line |
| Street | | | | | Schedule G, line |
| City | | State | | ZIP Code | |
| 3.3 | | | | | Schedule D, line |
| Name | | | | | Schedule E/F, line |
| Street | | | | | Schedule G, line |

Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12

Main December 15 or Page 36 of 56

ZIP Code

page 1 of <u>1</u>

Case 2:18-bk-13149-EPB

| Fill in this info | mation to identify | your case: | | | | | |
|--|--|--|---|-----------------------|--------------------------------------|---|---|
| Deptor 1 | Angelica Marie V | | | | | | |
| Fir Debtor 2 | st Name | Middle Name | Last Name | | | | |
| (Spouse, if filing) Fir | st Name | Middle Name | Last Name | | | | |
| United States Ban | kruptcy Court for the: _ | District of Arizona | | | | | |
| Case number | 2:18-bk-13149 | | , | | Check if the | nis is: | |
| () | | | | | | ended filing | 170 |
| | | | | | | plement showing post e as of the following d | |
| Official Forr | n 106I | | | | MM / D | D / YYYY | |
| Schedu | le I: You | r Income | | | | | 12/15 |
| supplying correctly you are separate sheet t | ct information. If you ted and your spou | ssible. If two married peo u are married and not filii se is not filing with you, o top of any additional pag | ng jointly, and yo lo not include info | ur spouse ormation | e is living with y about your spo | ou, include informatio use. If more space is n | n about your spouse. eeded, attach a |
| Fill in your elinformation. | nployment | | Debtor 1 | | | Debtor 2 or non-fi | ling spouse |
| If you have m attach a sepa | ore than one job, rate page with pout additional | Employment status | Employed Not employe | ed | | Employed Not employed | |
| Include part-ti self-employed | me, seasonal, or I work. | | | | | | |
| Occupation m | ay include student r, if it applies. | Occupation | Southwest I | Finance | LLC | | |
| | | Employer's name | | | | | |
| | | Employer's address | 970 Lake C | arillon D | rive | | |
| | | | Number Street Suite 400 | | | Number Street | |
| | | | Suite 400 | | | | |
| | | | Saint Peters | sbura. F | L 33716 | | |
| | | | City | | ZIP Code | City | State ZIP Code |
| | | How long employed then | re? | | | | |
| Part 2: Gi | ve Details About | Monthly Income | | | | | |
| spouse unles | s you are separated. non-filing spouse ha | the date you file this form we more than one employed tach a separate sheet to this | r, combine the info | | • | | , , |
| | | | | ı | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (be calculate what the monthly | | 2. \$ | 1,368.26 | \$ | |
| 3. Estimate an | d list monthly over | time pay. | | 3. +\$ | 0.00 | + \$ | |
| 4. Calculate g | ross income. Add lii | ne 2 + line 3. | | 4. \$ | 1,368.26 | \$ | |

☐ Yes. Explain:

2:18-bk-13149 Case number (if known)

Angelica Marie Wills Debtor 1 Middle Name Last Name

| | | | Fo | r Debtor 1 | | For Debtor 2 or non-filing spouse | |
|-----|--|-------------|-----------|------------------|---------------|-----------------------------------|---------------------|
| (| Copy line 4 here | → 4. | \$ | 1,368.26 | | \$ | |
| | ist all payroll deductions: | 7 T. | Ψ_ | | | Ψ | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 141.61 | | \$ | |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | | \$ | |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | | \$ | |
| | 5d. Required repayments of retirement fund loans | 5d. | \$ | 0.00 | | \$ | |
| | 5e. Insurance | 5e. | \$_ \$ | 0.00 | | \$ | |
| | | 5f. | Ψ_ \$ | 0.00 | | Φ | |
| | 5f. Domestic support obligations | | - | 0.00 | | Ф | |
| | 5g. Union dues | 5g. | \$_ | | | Φ | |
| | 5h. Other deductions. Specify: | 5h. | Ψ_ | 0.00 | | + \$ | |
| | | | \$_ | 0.00 | | \$ | |
| | | | \$_ | 0.00 | | \$ | |
| | | | \$_ | | | \$ | |
| 6. | Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$. | 6. | \$_ | 141.61 | | \$ | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 1,226.65 | | \$ | |
| | | | | | | | |
| 8. | List all other income regularly received: | | | | | | |
| | 8a. Net income from rental property and from operating a business, profession, or farm | | | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | 0.00 | | | |
| | monthly net income. | 8a. | \$_ | 0.00 | | \$ | |
| | 8b. Interest and dividends | 8b. | \$_ | 0.00 | | \$ | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive | ent | | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 0.0 | \$_ | 0.00 | | \$ | |
| | · · · · | 8c. 8d. | \$ | 0.00 | | \$ | |
| | 8d. Unemployment compensation 8e. Social Security | 8e. | Ψ_ \$ | 0.00 | | Φ | |
| | • | 00. | Ψ_ | | | Ψ | |
| | 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance and (if known) of any non-cash assistance and (if known) of any non-cash assistance and (if | nce | | | | | |
| | that you receive, such as food stamps (benefits under the Supplemental | | | | | | |
| | Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | | \$ | |
| | 1 7 | | Ψ_ | 0.00 | | Ψ | |
| | 8g. Pension or retirement income | 8g. | \$_ | 0.00 | | \$ | |
| | 8h. Other monthly income. Specify: | 8h. | +\$_ | 0.00 | | +\$ | |
| 9. | Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ | 0.00 | | \$ | |
| | - | | | | | | |
| | Calculate monthly income. Add line 7 + line 9. | 10 | \$ | 1,226.65 | + | s = | \$ 1,226.65 |
| , | Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | | | | · | |
| | State all other regular contributions to the expenses that you list in <i>Sche</i> Include contributions from an unmarried partner, members of your household, | | | donte vour roc | mm | nates and other | |
| | friends or relatives. | your u | CPCIII | aorito, your roc | , i i i i i i | iatos, and other | |
| | Do not include any amounts already included in lines 2-10 or amounts that are | not av | vailab | le to pay expe | nse | s listed in Schedule J. | |
| | Specify: | | | | | 11. + | \$ 0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. The | e resul | t is th | e combined m | onth | nly income. | 1 006 05 |
| | Write that amount on the Summary of Your Assets and Liabilities and Certain | Statist | ical Ir | formation, if it | арр | olies 12. | \$ 1,226.65 |
| | | | | | | | bined hly income |
| 13. | Do you expect an increase or decrease within the year after you file this | form? | • | | | | , |
| | No. | | | | | | |

Case 2:18-bk-13149-EPB Doc 10 Filed 11/12/18 Entered 11/12/18 17:18:12 Desc Main Document Page 38 of 56

| Fill in this ir | nformation to identify | your case: | | | | | |
|---------------------------|---|--|-------------|-----------------------------------|---------------------------------------|--------------------|----------------------------------|
| Debtor 1 | Angelica Marie Wills First Name | Middle Name La | ast Name | | Check if this is: | | |
| Debtor 2 | ristivante | Widdle Name | ast Name | | □An amonded f | ilina | |
| (Spouse, if filing) | First Name | | ast Name | | A supplement | | petition chapter 13 |
| United States | Bankruptcy Court for the: | District of Arizona | (9) | ate) | expenses as o | | |
| Case number (If known) | 2:18-bk-13149 | | (5) | ale) | MM / DD / YYYY | | |
| Official F | Form 106J | _ | | | | | |
| Sched | lule J: Yo | ur Expenses | ; | | | | 12/15 |
| information. I | | ossible. If two married peopled, attach another sheet to t | | | | | - |
| Part 1: | Describe Your Hou | ısehold | | | | | |
| 1. Is this a joi | nt case? | | | | | | |
| No. Go | es Debtor 2 live in a s | separate household? le Official Form 106J-2, <i>Exper</i> | nses for Se | eparate Housel | hold of Debtor 2. | | |
| 2. Do you hav | ve dependents? | V No | | | | | |
| - | Debtor 1 and | Yes. Fill out this information | ation for | Dependent's re Debtor 1 or Del | | Dependent's age | Does dependent live with you? |
| Debtor 2. | | each dependent | | | | | \square_{No} |
| Do not state names. | the dependents' | | | | · · · · · · · · · · · · · · · · · · · | | Yes |
| names. | | | | | | | \square_{No} |
| | | | | | | | Yes |
| | | | | | | | No |
| | | | | | | | Yes |
| | | | | | | | L No |
| | | | | | · · · · · · · · · · · · · · · · · · · | | Yes |
| | | | | | | | ∟ No |
| | | | | | | | Yes |
| expenses of | penses include of people other than od your dependents? | V No □ Yes | | | | | |
| | · | | | | | | |
| | | ing Monthly Expenses | | | | | |
| _ | of a date after the bar | r bankruptcy filing date unle nkruptcy is filed. If this is a s | - | _ | | - | - |
| Include exper | nses paid for with no | n-cash government assistan | nce if you | know the valu | ie of | | |
| such assistar | nce and have included | d it on Schedule I: Your Inco | ome (Offic | ial Form 106l. |) | Your expe | nses |
| | or home ownership or the ground or lot. | expenses for your residence | e. Include | first mortgage p | payments and 4. | \$ | 772.00 |
| If not incl | uded in line 4: | | | | | | 0.00 |
| 4a. Real | estate taxes | | | | 4a. | \$ | |
| 4b. Prop | erty, homeowner's, or r | renter's insurance | | | 4b. | \$ | 0.00 |
| 4c. Home | e maintenance, repair, | and upkeep expenses | | | 4c. | \$ | 0.00 |
| 4d. Home | eowner's association o | r condominium dues | | | 4d. | \$ | 0.00 |

2:18-bk-13149 Case number (if known)_

Middle Name Last Name

| | | | Your ex | penses |
|-----|--|------|---------|--------|
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ | 0.00 |
| 6. | Utilities: | | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$ | 445.00 |
| | 6b. Water, sewer, garbage collection | 6b. | \$ | 90.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 150.00 |
| | 6d. Other. Specify: | 6d. | \$ | 0.00 |
| 7. | Food and housekeeping supplies | 7. | \$ | 330.00 |
| 8. | Childcare and children's education costs | 8. | \$ | 0.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ | 105.00 |
| 10. | Personal care products and services | 10. | \$ | 0.00 |
| 11. | Medical and dental expenses | 11. | \$ | 0.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ | 340.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 225.00 |
| 14. | Charitable contributions and religious donations | 14. | \$ | 0.00 |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | \$ | 0.00 |
| | 15b. Health insurance | 15b. | \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. | \$ | 85.00 |
| | 15d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ | 0.00 |
| 17. | Installment or lease payments: | | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ | 410.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. Other. Specify:Additional Car Payments | 17c. | \$ | 0.00 |
| | 17d. Other. Specify: | 17d. | \$ | 0.00 |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$ | 0.00 |
| 19. | Other payments you make to support others who do not live with you. | | | |
| | Specify: | 19. | \$ | 0.00 |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ie. | | |
| | 20a. Mortgages on other property | 20a. | \$ | 0.00 |
| | 20b. Real estate taxes | 20b. | \$ | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |

2:18-bk-13149 Angelica Marie Wills Case number (if know Debtor 1 21. Other. Specify:___ 0.00 Calculate your monthly expenses. 2,952.00 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a 22b. 2,952.00 and 22b. The result is your monthly expenses. 22c. 23. Calculate your monthly net income. 1,226.65 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 2,952.00 23b. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. -1,725.35 The result is your monthly net income. 23c 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. ☐ Yes. Explain here:

| Fill in this in | formation to ider | ntify your case: | | |
|--|-----------------------------------|------------------------------|-----------|--|
| Debtor 1 | Angelica Mari | e Wills Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E Case number (If known) | Bankruptcy Court for 2:18-bk-1314 | the District of Arizona 9 | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Did you pay or agree to pay someone who is NOT an attorney to No Yes. Name of person Under penalty of perjury, I declare that I have read the summary atthat they are true and correct. | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|---|--|
| ✓ No ☐ Yes. Name of person Under penalty of perjury, I declare that I have read the summary a | Attach <i>Bankruptcy Petition Preparer's Notice, Declaration, and</i> Signature (Official Form 119). |
| ☐ Yes. Name of person Under penalty of perjury, I declare that I have read the summary a | Signature (Official Form 119). |
| | |
| | and schedules filed with this declaration and |
| | and schedules filed with this declaration and |
| | and schedules filed with this declaration and |
| | and schedules filed with this declaration and |
| that they are true and correct. | |
| | |
| | |
| 🕻 /s/ Angelica Marie Wills | |
| Signature of Debtor 1 Signature | of Debtor 2 |
| 11/10/0010 | |
| Date 11/12/2018 Date MM DD / YYYY | |

| Fill in this ir | formation to iden | tify your case: | | |
|--------------------|-------------------|-------------------------|-----------|--|
| Debtor 1 | Angelica Marie Wi | lls | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | |
| | | he: District of Arizona | | |
| Case number | 2:18-bk-13149 | | | |
| (If known) | | | | |

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Give Details About Your Marital State 1. What is your current marital status? Married Not married | us and Where Yo | ou Lived Before | |
|---|-------------------------------|--|------------------------------------|
| 2. During the last 3 years, have you lived anywhere o V No Yes. List all of the places you lived in the last 3 ye | | | |
| Debtor 1: | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| Number Street | From To | Same as Debtor 1 Number Street | Same as Debtor 1 From To |
| City State ZIP Code | | City State ZIP Code | |
| Number Street | From To | Same as Debtor 1 Number Street | Same as Debtor 1 From To |
| City State ZIP Code 3. Within the last 8 years, did you ever live with a spo and territories include Arizona, California, Idaho, Loui ✓ No ☐ Yes. Make sure you fill out Schedule H: Your Cod | siana, Nevada, Nev | w Mexico, Puerto Rico, Texas, Washington, and Wiscon | ommunity property states nsin.) |

| Part 2: Explain the Sources of Y | our income | | | | |
|--|---|---|--|--|--|
| Did you have any income from emp Fill in the total amount of income you If you are filing a joint case and you h | received from all jobs | and all busine | esses, including part-t | ime activities. | ndar years? |
| □ No☑ Yes. Fill in the details. | | | | | |
| | Debtor 1 | | | Debtor 2 | |
| | Sources of in Check all that | apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current yea the date you filed for bankrupt | bonuses, | ommissions, tips a business | \$ 29,795.57 | Wages, commissions, bonuses, tips Operating a business | \$ |
| For last calendar year: (January 1 to December 31, 201) | bonuses, 17 Operating | ommissions, tips a business | \$ <u>32,113.00</u> | □ Wages, commissions, bonuses, tips □ Operating a business | \$ |
| For the calendar year before the (January 1 to December 31, 201 | bonuses, | ommissions, tips | \$ <u>21,819.00</u> | Wages, commissions, bonuses, tips | \$ |
| Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case List each source and the gross incom | during this year or the r that income is taxable ensions; rental income; and you have income | Examples of interest; divid that you receive | f other income are all dends; money collector ved together, list it or | ed from lawsuits; royalties; and some under Debtor 1. | |
| Did you receive any other income of include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case | during this year or the r that income is taxable ensions; rental income; and you have income to the from each source se | Examples of interest; divid that you receive | f other income are all dends; money collector ved together, list it or | ed from lawsuits; royalties; and some under Debtor 1. at you listed in line 4. | |
| Did you receive any other income of include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case List each source and the gross income. | during this year or the r that income is taxable ensions; rental income; and you have income | Examples of interest; divid that you receive | f other income are all dends; money collector ved together, list it or | ed from lawsuits; royalties; and some under Debtor 1. | |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case List each source and the gross income. | during this year or the r that income is taxable ensions; rental income; and you have income to the from each source se | Examples or interest; divide that you receive parately. Do receive gross inceach sour | f other income are all dends; money collected wed together, list it or not include income the come from rece ductions and | ed from lawsuits; royalties; and some under Debtor 1. at you listed in line 4. | |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case List each source and the gross income No Yes. Fill in the details. | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | e. Examples of interest; dividing that you receive parately. Do receive parately. | f other income are all dends; money collected together, list it or not include income the come from the ductions and significant and significa | ed from lawsuits; royalties; and some under Debtor 1. at you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; powinnings. If you are filing a joint case List each source and the gross income. No Yes. Fill in the details. | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | e. Examples of interest; dividing that you receive parately. Do receive parately. | f other income are all dends; money collected together, list it or not include income the come from the ductions and significant and significa | ed from lawsuits; royalties; and some under Debtor 1. at you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; powinnings. If you are filing a joint case List each source and the gross income. No Yes. Fill in the details. | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | e. Examples of interest; dividing that you receive parately. Do receive parately. | f other income are all dends; money collected together, list it or not include income the come from the ductions and significant and significa | ed from lawsuits; royalties; and some under Debtor 1. at you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case List each source and the gross income No Yes. Fill in the details. | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | e. Examples of interest; dividing that you receive parately. Do receive parately. | f other income are all dends; money collected together, list it or not include income the come from the ductions and significant and significa | ed from lawsuits; royalties; and some under Debtor 1. at you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case that each source and the gross income. No Yes. Fill in the details. | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | e. Examples of interest; dividing that you receive parately. Do receive parately. | f other income are all dends; money collected together, list it or not include income the come from tree ductions and significant. | ed from lawsuits; royalties; and some under Debtor 1. at you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case that each source and the gross income. No Yes. Fill in the details. | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | e. Examples of interest; dividing that you receive parately. Do receive parately. | f other income are all dends; money collected together, list it or not include income the come from tree ductions and significant. | ed from lawsuits; royalties; and once under Debtor 1. at you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case teach source and the gross income. No Seember 31, | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | Gross ince each sour (before de exclusions \$ | f other income are all dends; money collected together, list it or not include income the come from cree ductions and six and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the come from cree ductions and six are all to the cree ductions are all to the cree ductions and six are all to the cree ductions and six are all the cree ductions are | ed from lawsuits; royalties; and once under Debtor 1. at you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) \$ |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case the List each source and the gross income. No Yes. Fill in the details. Different around the gross income. Include income regardless of whether a joint case the gross income. Include income regardless of whether a joint case the gross income. Include income regardless of whether a joint case the gross income. Include income regardless of whether and other payments; per winding a joint case the gross income. Include income regardless of whether and other payments; per winding a joint case the gross income. Include income regardless of whether and other payments; per winding a joint case the gross income. Include income regardless of whether and other payments; per winding a joint case the gross income. Include income regardless of whether and other payments; per winding a joint case the gross income. Include income regardless of whether and other payments; per winding a joint case the gross income. Include income regardless of whether and other payments; per winding a joint case the gross income. Include inclu | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | Gross ince each sour (before de exclusions \$ \$ | f other income are all dends; money collected ved together, list it or not include income the come from ree ductions and si) | ed from lawsuits; royalties; and once under Debtor 1. at you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) \$ |
| Did you receive any other income of Include income regardless of whether and other public benefit payments; per winnings. If you are filing a joint case List each source and the gross income No | during this year or the r that income is taxable ensions; rental income; and you have income the from each source se | Gross ince each sour (before de exclusions \$ | f other income are all dends; money collected wed together, list it or not include income the come from tree ductions and significant and significant and significant are significant. | ed from lawsuits; royalties; and once under Debtor 1. at you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) \$ |

Last Name

| Part 3: | List C | Certain Paymo | ents You | Made Before | e You Filed | for Bankruptcy | | |
|-------------|------------|------------------|----------------|-----------------|------------------|---|-------------------------------|------------------------|
| | | | | | | | | |
| 6. Are eith | her Deb | otor 1's or Debt | or 2's debt | s primarily co | nsumer debt | s? | | |
| ☐ No. | "incur | red by an indivi | dual primari | ly for a person | al, family, or h | ousehold purpose." | e defined in 11 U.S.C. § 101(| 8) as |
| | Durin | g the 90 days be | etore you tile | ed for bankrup | itcy, did you pa | ay any creditor a total of | \$6,425^ or more? | |
| | □N | o. Go to line 7. | | | | | | |
| | | ne total amount | you paid th | at creditor. Do | not include pa | \$6,425* or more in one ayments for domestic sunents to an attorney for t | pport obligations, such as | |
| | * Sub | | | - | | | ifter the date of adjustment. | |
| ✓ Yes | s. Debt | or 1 or Debtor 2 | or both ha | ve primarily o | consumer del | bts. | | |
| | | | | | | ay any creditor a total of | \$600 or more? | |
| | ₽ N | o. Go to line 7. | | | | | | |
| | □ Y | creditor. Do | not include | payments for d | domestic supp | \$600 or more and the to oort obligations, such as ey for this bankruptcy cas | | |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | | | | | | \$ | \$ | ☐ Mortgage |
| | | Creditor's Name | | | | | | ☐ Car |
| | | N | | | | | | ☐ Credit card |
| | | Number Street | | | | | | Loan repayment |
| | | | | | | | | ☐ Suppliers or vendors |
| | | | | | | | | Other |
| | | City | State | ZIP Code | | | | |
| | | | | | | • | • | _ |
| | | Creditor's Name | | | | \$ | \$ | ☐ Mortgage |
| | | | | | | | | ☐ Car |
| | | Number Street | | | | | | Credit card |
| | | | | | | | | Loan repayment |
| | | | | | | | | Suppliers or vendors |
| | | City | State | ZIP Code | | | | Other |
| | _ | | | | | | | |
| | | | | | | \$ | \$ | ☐ Mortgage |
| | | Creditor's Name | | | | | | ☐ Car |
| | | | | | | | | ☐ Credit card |
| | | Number Street | | | | | | Loan repayment |
| | | | | | | | | Suppliers or vendors |
| | | | | | | | | Other |
| | | City | State | ZIP Code | | | | |
| | | | | | | | | |

City

Insider's Name

Number Street

State

ZIP Code

Desc

First Name Middle Name

Last Name

| rt 4: Identify Legal Actions, Reposs | sessions, and | Foreclosures | | | | |
|--|--|--|---|-----------|-------------------|---------------------------|
| Within 1 year before you filed for bankruptonist all such matters, including personal injury and contract disputes. | | | | | | - |
| l No | | | | | | |
| Yes. Fill in the details. | | | | | | |
| | Nature of the | case | Court or agency | | | Status of the case |
| Capital One Bank v. Angel Wills aka | | Date filed: 01/16/2018 | | | | |
| se title: Angelica Wills and J Doe spouse | , | | Maryvale Justice | e Court | | - Pending |
| | | | Court Name | | | On appeal |
| | | | 10420 W. Van B | uren Ave | nue | Concluded |
| | | | Number Street | | | Concluded |
| 000010010010 | | | Avondale | AZ | 85323 | _ |
| se number CC2018-010043 | | | City | State | ZIP Code | |
| Capital One Bank v. Angelica Mills | Justice Civil; [| Date filed: 02/01/2018 | Managala luation | o Court | | |
| 444 | | | Maryvale Justice Court Name | e Court | | - Pending |
| se title: | | | 10420 W Vor 5 | luron A | nuo | On appeal |
| | | | 10420 W. Van E Number Street | outen AVE | nut | Concluded |
| | | | Avondale | AZ | 85323 | |
| ase number CC2018-022936 | | | City | State | ZIP Code | _ |
| heck all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. | ow. | | | 70 | shed, attached, s | |
| No. Go to line 11. | Des | scribe the property | | , • | Date | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit | Des 2013 | scribe the property 3 Toyota Venza s: 96000 | | | | Value of the property \$ |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name | Des 2013 | 3 Toyota Venza | | | Date | 0.00 |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit | 2013 Mile | 3 Toyota Venza | | | Date | 0.00 |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 | Des 2011 Mile | 3 Toyota Venza ss: 96000 | nanad | | Date | 0.00 |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 | 2013 Mile | 3 Toyota Venza s: 96000 plain what happened Property was reposs | | | Date | 0.00 |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street | Des 2013 Mile Exp | 3 Toyota Venza is: 96000 plain what happened Property was reposs Property was foreclo | sed. | | Date | 0.00 |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street Cedar Rapids IA 524 | Exp | 3 Toyota Venza s: 96000 plain what happened Property was reposs | esed. hed. | | Date | 0.00 |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street | Des 2013 Mile Exp | 3 Toyota Venza is: 96000 plain what happened Property was reposs Property was foreclo | esed. hed. | | Date | \$ |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street Cedar Rapids IA 524 | Des 2013 Mile Exp | 3 Toyota Venza is: 96000 plain what happened Property was reposs Property was forector Property was garnist Property was attache | esed. hed. | | Date 09/01/2018 | \$ |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street Cedar Rapids IA 524 | Des 2013 Mile Exp | 3 Toyota Venza is: 96000 plain what happened Property was reposs Property was forector Property was garnist Property was attache | esed. hed. | | Date 09/01/2018 | \$ |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street Cedar Rapids IA 524 | Des 2013 Mile Exp | 3 Toyota Venza is: 96000 plain what happened Property was reposs Property was forector Property was garnist Property was attache | esed. hed. | | Date 09/01/2018 | \$ |
| Toyota Motor Credit Creditor's Name Po Box 9786 Number Street Cedar Rapids IA 524 City State ZIP C | Des Des Des | 3 Toyota Venza is: 96000 plain what happened Property was reposs Property was forector Property was garnist Property was attache | esed. hed. | | Date 09/01/2018 | \$ |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street Cedar Rapids IA 524 City State ZIP C | Des Des Des | 3 Toyota Venza s: 96000 plain what happened Property was repose Property was forecle Property was garnisi Property was attache scribe the property | sed. hed. ed, seized, or levid | | Date 09/01/2018 | \$ |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street Cedar Rapids IA 524 City State ZIP C | Des Des Des | 3 Toyota Venza s: 96000 plain what happened Property was reposs Property was forecle Property was garnisi Property was attache scribe the property | essed. sed. ed, seized, or levidence sessed. | | Date 09/01/2018 | \$ |
| No. Go to line 11. Yes. Fill in the information below. Toyota Motor Credit Creditor's Name Po Box 9786 Number Street Cedar Rapids IA 524 City State ZIP C | Des 2013 Mile Exp 2010 Des 201 | 3 Toyota Venza s: 96000 plain what happened Property was repose Property was forecle Property was garnisi Property was attache scribe the property | sed. hed. ed, seized, or levid sessed. sessed. | | Date 09/01/2018 | \$ |

| No | | | |
|--|--|-------------------------------|------------|
| Yes. Fill in the details. | | | |
| | Describe the action the creditor took | Date action | Amount |
| | | was taken | 7 |
| Creditor's Name | | | |
| Number Street | | : | \$ |
| vulliber Street | | | |
| | | | |
| City State ZIP Code | Last 4 digits of account number: XXXX– | | |
| | | | |
| | cy, was any of your property in the possession of | f an assignee for the benefit | of |
| litors, a court-appointed receiver, a cus | stodian, or another official? | | |
| No | | | |
| Yes | | | |
| List Certain Gifts and Contribu | tions | | |
| | | | |
| in 2 years before you filed for bankrupt | tcy, did you give any gifts with a total value of mo | ore than \$600 per person? | |
| No | | | |
| Yes. Fill in the details for each gift. | | | |
| ĕ | | | |
| | | | |
| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| Gifts with a total value of more than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| Gifts with a total value of more than \$600 | Describe the gifts | | |
| Gifts with a total value of more than \$600 | Describe the gifts | | Value |
| Gifts with a total value of more than \$600 per person | Describe the gifts | | |
| Gifts with a total value of more than \$600 per person | Describe the gifts | | |
| Gifts with a total value of more than \$600 per person | Describe the gifts | | |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street | Describe the gifts | | |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | | |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street | Describe the gifts | | |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you | | the gifts | \$\$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | Describe the gifts Describe the gifts | | |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | | Dates you gave | \$\$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | | Dates you gave | \$\$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code | | Dates you gave | \$\$ \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | | Dates you gave | \$\$ \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | | Dates you gave | \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | | Dates you gave | \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | | Dates you gave | \$ |

Debtor 1

| | uptcy, did you give any gifts or contributions with a total value | or more than que | to any charity: |
|--|---|-----------------------|-------------------|
| ☑ No ☑ Yes. Fill in the details for each gift or co | ontribution. | | |
| | | _ | |
| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Date you contributed | Value |
| | | | |
| Charity's Name | _ | | \$ |
| | _ | | \$ |
| | | | |
| Number Street | _ | | |
| Oite. Otata 710 Orda | _ | | |
| City State ZIP Code | | | |
| 6: List Certain Losses | | | |
| | | | |
| fithin 1 year before you filed for bankru r gambling? | ptcy or since you filed for bankruptcy, did you lose anything b | ecause of theft, fire | , other disaster, |
| | | | |
| Yes. Fill in the details. | | | |
| Describe the property you lost and how | Describe any insurance coverage for the loss | Date of your loss | Value of property |
| the loss occurred | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | | lost |
| | | | \$ |
| | | | |
| | | | |
| 7: List Certain Payments or Tra | | | |
| ithin 1 year before you filed for bankru onsulted about seeking bankruptcy or | ptcy, did you or anyone else acting on your behalf pay or trans preparing a bankruptcy petition? | sfer any property to | anyone you |
| clude any attorneys, bankruptcy petition p | preparers, or credit counseling agencies for services required in yo | ur bankruptcy. | |
| ′ No ☑ Yes. Fill in the details. | | | |
| Test. I iii iii die details. | Description and value of any property transferred | Date payment or | Amount of paymen |
| Person Who Was Paid | - | transfer was made | |
| Number Street | _ | | \$ |
| Number Succi | | | - |
| | - | | \$ |
| | | | |
| City State ZIP Code | - | | |
| City State ZIP Code Email or website address | - | | |

Debtor 1

| st Name | Middle Name | Last Name |
|---------|-------------|-----------|

| | Description and value of any property tr | ansferred | Date payment or transfer was made | Amount of payment |
|---|--|-----------|-----------------------------------|-------------------|
| Person Who Was Paid | | | | \$ |
| Number Street | | | | \$ |
| | | | | |
| City State ZIP Code | | | | |
| Email or website address | _ | | | |
| Person Who Made the Payment, if Not You | | | | |
| Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that y No Yes. Fill in the details. | tors or to make payments to your cred | | ior any property to | anyone who |
| | Description and value of any property to | ansferred | Date payment or transfer was made | Amount of paymer |
| Person Who Was Paid | | | | \$ |
| Number Street | | | | \$ |
| City State ZIP Code | | | | |
| Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers to not include gifts and transfers that you har No Yes. Fill in the details. Unknown | business or financial affairs? made as security (such as the granting of ve already listed on this statement. Description and value of property transferred | | ortgage on your prop | |
| Person Who Received Transfer | Comic books and beanie babies, \$150.00 | | | 11/01/2018 |
| Number Street | | | | |
| City State ZIP Code | | | | |
| Person's relationship to you | | | | |
| Person Who Received Transfer | | | | |
| Number Street | | | | |
| City State ZIP Code | | | | |
| Person's relationship to you | | | | |

Debtor 1 Case number (if know 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ✓ No ☐ Yes. Fill in the details. Date transfer Description and value of the property transferred was made Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. ✓ No ☐ Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Name of Financial Institution Checking XXXX-Savings Number Street Money market Brokerage City ZIP Code Checking XXXX-Name of Financial Institution Savings Money market Number Street Brokerage City ZIP Code State 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ✓ No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Yes Name of Financial Institution Name Number Street Number Street

Official Form 107

City

ZIP Code

State

City

ZIP Code

Angelica Marie Wills 2:18-bk-13149 Case number (if knd 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? Household goods, \$3,000.00 **✓** No Storage unit in Iowa - Lake Storage Spirit Name Name of Storage Facility Yes Number Street Number Street City State ZIP Code ZIP Code Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street ZIP Code ZIP Code City Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **V** No Yes. Fill in the details.

Official Form 107

Name of site

Street

ZIP Code

State

Environmental law, if you know it

Governmental unit

Governmental unit

Number Street

City

ZIP Code

State

Desc

Date of notice

| 25. Have you notified an | y governmental unit of | any release of hazardous materia | il? | | |
|--|---------------------------|--------------------------------------|------------------------|--------------------------------|-----------------|
| ∠ No | | | | | |
| Yes. Fill in the de | etails. | | | | |
| | | Governmental unit | Environmental law | , if you know it | Date of notice |
| | | | | | |
| Name of site | | Governmental unit | | | |
| Number Street | | Number Street | | | |
| | | | | | |
| | | City State ZIP Code | | | |
| City | State ZIP Code | | | | |
| | | | | . | |
| | ty in any judicial or adn | ninistrative proceeding under any | environmental lav | v? Include settlements and o | rders. |
| ✓ No✓ Yes. Fill in the do | etails | | | | |
| <u> </u> | | Court or agency | Nature of the | case | Status of the |
| | | | | | case |
| Case title | | Court Name | _ | | Pending |
| | | Court Name | | | On appeal |
| | | Number Street | _ | | Concluded |
| Case number | | | | | |
| Odse Humber | | City State ZIP Cod | de | | |
| Part 11: Give Det | ails About Your Bus | iness or Connections to Any | Business | | |
| | | cy, did you own a business or ha | | wing connections to any busi | ness? |
| A sole propri | etor or self-employed i | n a trade, profession, or other act | ivity, either full-tim | _ | |
| ☐ A member of ☐ A partner in a | | any (LLC) or limited liability partn | ership (LLP) | | |
| | | ecutive of a corporation | | | |
| | | or equity securities of a corpora | ition | | |
| No. None of the | above applies. Go to Pa | ort 12. | | | |
| _ | | in the details below for each busi | ness. | | |
| | | Describe the nature of the busines | s | Employer Identification number | |
| Business Name | | | | Do not include Social Security | number or IIIN. |
| | | | | EIN: | |
| Number Street | | | | Dates business existed | |
| | | Name of accountant or bookkeepe | r | | |
| | | | | From T | о |
| City | State ZIP Code | Describe the nature of the busines | S | Employer Identification number | • |
| Business Name | | 2000 the nature of the business | | Do not include Social Security | |
| Dusiness Name | | | | EIN. | |
| Number Street | | | | EIN: | |
| | | | | Dates business existed | |
| | | Name of accountant or bookkeepe | • | From | To |
| City | State ZIP Code | | | From | То |
| • | *** | | | | |

Desc

√ No

☐ Yes. Name of person

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

| Fill in this in | formation to ide | ntify your case: | |
|---------------------|---------------------|---------------------------|-----------|
| Debtor 1 | Angelica Marie Will | ls | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States I | Bankruptcy Court fo | r the District of Arizona | |
| Case number | 2:18-bk-13149 | | ·, |
| (If known) | | | |

Statement of Intention for Individuals Filing Under Chapter 7

12/15

Check if this is an

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: C information below. | Creditors Who Have Claims Secured by Property (Offic | ial Form 106D), fill in the |
|---|--|---|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's name: Progressive Leasing | ☐ Surrender the property. | □No |
| Description of Bed frame and chair property | Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | <u>✓</u> Yes |
| securing debt: | Retain and pay pursuant to contract | - |
| Creditor's Dynasty Finance Inc | ☐ Surrender the property. | □No |
| name: | Retain the property and redeem it. | ✓ Yes |
| Description of property securing debt: 2007 Toyota Corolla | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □No |
| name: | ☐ Retain the property and redeem it. | Yes |
| Description of property securing debt: | ☐ Retain the property and enter into a Reaffirmation Agreement. | |
| Cooding door. | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |

| Part 2: | List Your Unexpired Personal Property Leases |
|---------|--|
| rail 2. | LIST TOUT OHEXPITED PERSONAL PROPERTY LEASES |

| essor's name: | □ No - Yes □ No □ Yes |
|----------------------------------|-----------------------|
| escription of leased | □ No |
| | |
| escription of leased roperty: | Yes |
| | |
| essor's name: | □No |
| Description of leased property: | Yes |
| Lessor's name: | □ No □ Yes |
| Description of leased property: | L] Yes |
| .essor's name: | □ No |
| Description of leased property: | L.∣Yes |
| Lessor's name: | □No |
| Description of leased property: | □Yes |
| Lessor's name: | □No |
| Description of leased property: | Yes |